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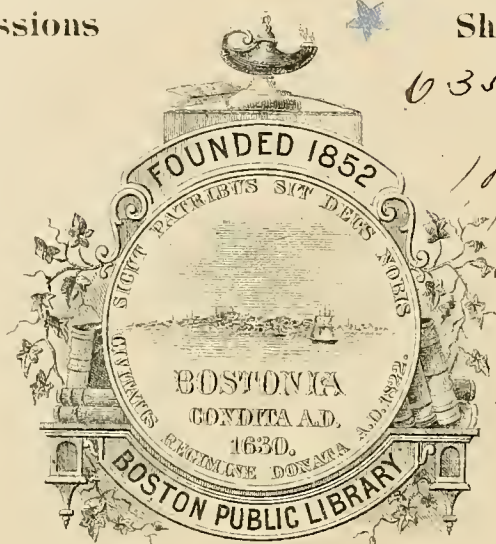


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Twenty-Ninth

TWENTY-NINTH REPORT

OF

THE TRUSTEES

OF

THE BOSTON CITY HOSPITAL;

WITH

9/18/93.
REPORT OF THE SUPERINTENDENT,

THE MEDICAL AND SURGICAL STATISTICS, RULES FOR
ADMISSIONS AND DISCHARGES, PROSPECTUS OF
TRAINING SCHOOL FOR NURSES, RULES
FOR THE CONVALESCENT
HOME, ETC.

FOR THE YEAR,

FEBRUARY 1, 1892, TO JANUARY 31, 1893.



BOSTON:

ROCKWELL AND CHURCHILL, CITY PRINTERS.

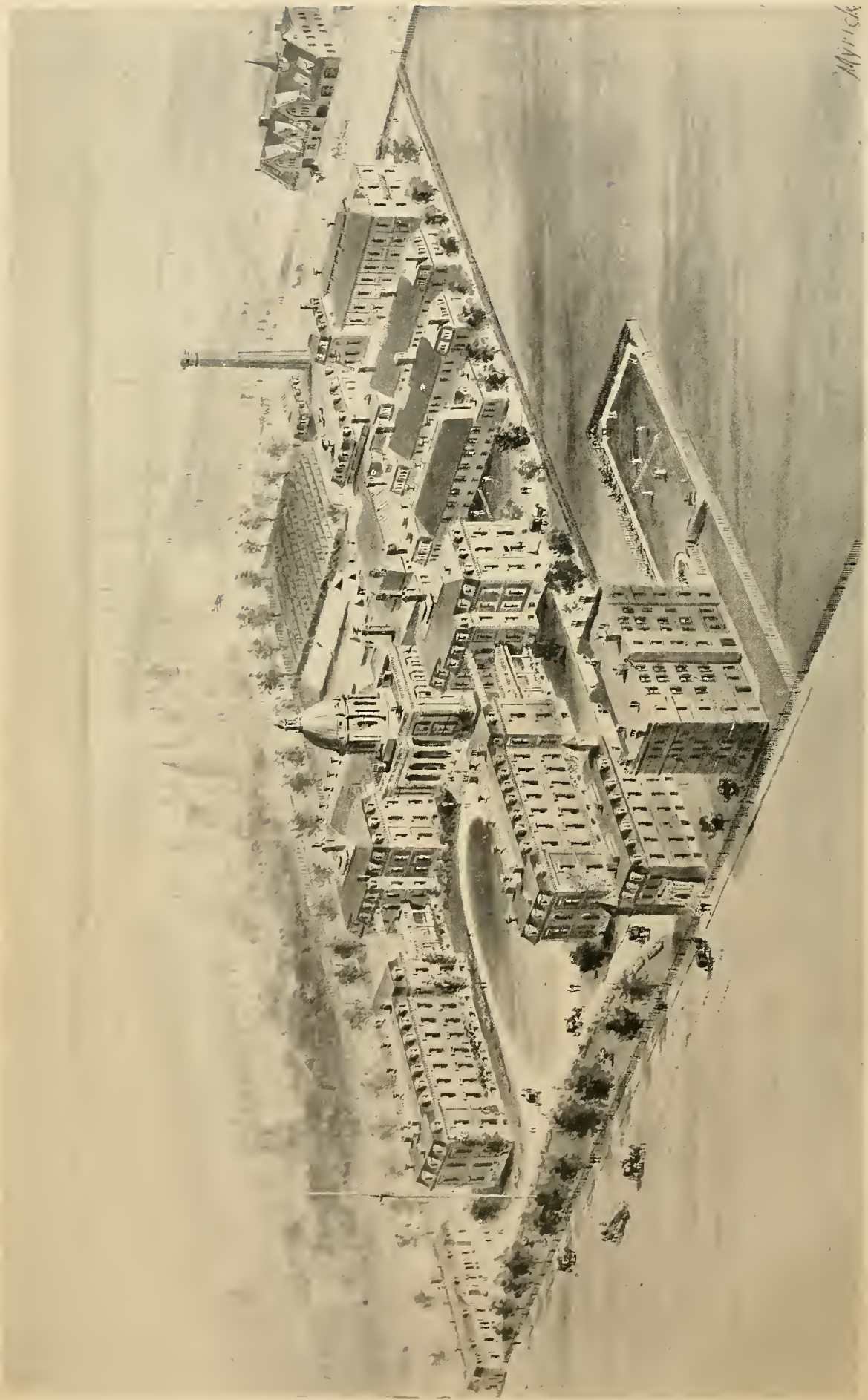
1893.







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Merrick

THE BOSTON CITY HOSPITAL, 1893.

TWENTY-NINTH REPORT
OF
THE TRUSTEES
OF
THE BOSTON CITY HOSPITAL;
WITH
REPORT OF THE SUPERINTENDENT,
THE MEDICAL AND SURGICAL STATISTICS, RULES FOR
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TRAINING SCHOOL FOR NURSES, RULES
FOR THE CONVALESCENT
HOME, ETC.
FOR THE YEAR,
FEBRUARY 1, 1892, TO JANUARY 31, 1893.



BOSTON:
ROCKWELL AND CHURCHILL, CITY PRINTERS.
1893.

19. cont.

Boston, City Hospital,
Sept. 18, 1893.

*6359.17
29th Report,
1892/3.

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TWENTY-NINTH REPORT
OF THE
TRUSTEES
OF
THE BOSTON CITY HOSPITAL;
WITH THE
REPORT OF THE SUPERINTENDENT,
THE MEDICAL AND SURGICAL STATISTICS, RULES FOR
ADMISSIONS AND DISCHARGES, PROSPECTUS
OF TRAINING SCHOOL FOR NURSES,
RULES FOR THE CONVALESCENT
HOME, ETC.,
FOR THE YEAR BEGINNING FEBRUARY 1, 1892,
AND ENDING JANUARY 31, 1893.

TRUSTEES.

A. SHUMAN, <i>President</i> . . .	Term expires in 1895.
HENRY H. SPRAGUE, <i>Secretary</i> . .	Term expires in 1894.
JOHN F. YOUNG, M.D. . . .	Term expires in 1896.
GEO. B. NICHOLS	Term expires in 1893.
WM. A. DUNN, M.D. . . .	Term expires in 1897.

MEDICAL AND SURGICAL STAFF.

Superintendent and Resident Physician.

GEO. H. M. ROWE, M.D.

Consulting Physicians and Surgeons.

Benj. E. Cotting, M.D.	Wm. Ingalls, M.D.
A. D. Sinclair, M.D.	W. C. B. Fifield, M.D.
Benj. Cushing, M.D.	H. W. Williams, M.D.

VISITING STAFF.

Senior Visiting Surgeon.

D. W. Cheever, M.D.

Visiting Physicians.

A. L. Mason, M.D.	Chas. F. Folsom, M.D.
A. M. Sumner, M.D.	T. M. Rotch, M.D.
G. B. Shattuck, M.D.	

Visiting Surgeons.

Geo. W. Gay, M.D.	Abner Post, M.D.
Wm. P. Bolles, M.D.	M. F. Gavin, M.D.
Edward H. Bradford, M.D.	

Visiting Physicians for Diseases of Women.

John G. Blake, M.D.	Edward J. Forster, M.D.
---------------------	-------------------------

Visiting Ophthalmic Surgeon.

O. F. Wadsworth, M.D.

Visiting Aural Surgeon.

J. Orne Green, M.D.

Visiting Pathologist.

Wm. T. Councilman, M.D.

Assistant Visiting Surgeons.

Herbert L. Burrell, M.D. | Francis S. Watson, M.D.
H. W. Cushing, M.D.

Assistant Visiting Physicians.

Francis H. Williams, M.D. | E. M. Buckingham, M.D.
Chas. F. Withington, M.D.

OUT-PATIENT STAFF.

Physicians to Out-Patients.

Vincent Y. Bowditch, M.D. | Henry Jackson, M.D.
George G. Sears, M.D.

Surgeons to Out-Patients.

Geo. H. Monks, M.D. | Robert W. Lovett, M.D.
Herbert L. Smith, M.D.

Ophthalmic Surgeons to Out-Patients.

Lewis S. Dixon, M.D. | Edwin E. Jack, M.D.

Physician for Diseases of Women to Out-Patients.

C. M. Green, M.D.

Physicians for Diseases of the Nervous System to Out-Patients.

Morton Prince, M.D. | Philip Coombs Knapp, M.D.
Wm. N. Bullard, M.D.

Physicians for Diseases of the Skin to Out-Patients.

Edward Wigglesworth, M.D. | Geo. H. Tilden, M.D.

Physicians for Diseases of the Throat to Out-Patients.

Thos. Amory DeBlois, M.D. | J. W. Farlow, M.D.

Aural Surgeons to Out-Patients.

Geo. A. Leland, M.D. | Edmund D. Spear, M.D.

Medico-Legal Pathologist.

F. W. Draper, M.D.

ANNUAL REPORT OF

Medical Registrar.

A. S. Knight, M.D.

Surgical Registrar.

C. M. Whitney, M.D.

MEDICAL AND SURGICAL ASSISTANTS.

Assistant to the Ophthalmic Surgeons.

Walter B. Lancaster, M.D.

*Assistants to the Physicians for Diseases of the
Nervous System.*

*J. A. Jeffries, M.D. | E. G. Brackett, M.D.

Assistant to the Physicians for Diseases of the Skin.

James S. Howe, M.D.

Assistant to the Physicians for Diseases of the Throat.

Geo. A. Leland, M.D.

Assistant to the Physician for Diseases of Women.

Geo. Haven, M.D.

Assistant to the Pathologist.

F. B. Mallory, M.D.

Physicians to the Convalescent Home.

C. Ellery Stedman, M.D. | Daniel D. Gilbert, M.D.

Edward T. Twitchell, M.D.

HOUSE OFFICERS.

*House Physicians.**House Surgeons.*

(For six months ending July 4, 1892.)

Alexander Quackenboss,
Benjamin Tenney,
Harvey P. Towle.Lombard C. Jones,
Edward H. Nichols,
Elliott Washburne.

*Died March 26, 1892.

*House Physicians.**House Surgeons.*

(For six months ending Jan. 2, 1893.)

Henry S. Rowen,
Edward G. Bryant,
Carroll E. Edson.

Walter G. Stebbins,
Farrington H. Whipple,
W. Huntley Macdonald.

(For six months beginning Jan. 2, 1893.)

Herbert C. Emerson,
J. Bergen Ogden,
George P. Cogswell.

Walter F. Sawyer,
Harold G. Gross,
David D. Brough.

Medical and Surgical House Officer (Senior).

(For six months ending July 4, 1892.)

John L. Ames.

(For six months ending Jan. 2, 1893.)

Gilman D. Frost.

(For six months beginning Jan. 2, 1893.)

Robert W. Hardon.

Gynæcological House Physician.

Horace S. Moran.

*Medical Internes.**Surgical Internes.*

(For month ending Feb. 1, 1893.)

Robert W. Hastings,
Robert M. Merrick,
Edward S. Abbot.

Frank A. Higgins,
George A. Harlow,
Gilman P. Robinson.

Medical and Surgical House Officer (Junior).

(For six months beginning Jan. 2, 1893.)

John S. Phelps.

Gynæcological House Officer (Junior).

(For six months beginning Jan. 2, 1893.)

Samuel E. Courtney.

Ophthalmic and Aural Interne.

(For six months ending July 4, 1892.)

George A. Leahey.

*Medical Externes.**Surgical Externes.*

(For six months beginning Jan. 2, 1893.)

Frederick S. De Lue,
 Sydney Y. Wynne,
 Arthur B. Duel.

Henry F. R. Watts,
 Charles M. Smith,
 Charles B. Stevens.

Medical and Surgical Externe.

(For six months beginning Jan. 2, 1893.)

Follen Cabot, Jr.

Gynæcological Externe.

(For six months beginning Jan. 2, 1893.)

William C. Billings.

HOSPITAL OFFICERS.

Horace D. Arnold, M.D., *Assistant Superintendent.*

Resigned May 31, 1892.

Edwin W. Dwight, M.D., *Assistant Superintendent.*

Appointed May 31, 1892.

Edward H. Nichols, M.D., *Executive Assistant.*

Appointed May 31, 1892.

Samuel M. Nesmith, *Steward.*Greenleaf R. Tucker, B.S., *Chemist.*Miss Lucy L. Drown, *Superintendent of Nurses and Matron.*Miss Alice G. Dexter, *Assistant Superintendent of Nurses.*Miss Emma T. Elliott, *Night Superintendent of Nurses.*Miss Sarah P. Boyden, *Housekeeper.*

CONVALESCENT HOME.

Miss Mary M. Riddle, *Matron.*

REPORT OF THE TRUSTEES.

THE BOSTON CITY HOSPITAL,
BOSTON, January 31, 1893.

HON. NATHAN MATTHEWS, JR.,

Mayor of the City of Boston:

The Trustees of The Boston City Hospital, in compliance with the Ordinances, respectfully present herewith their annual report *for the year, from February 1, 1892, to January 31, 1893:*

NUMBERS OF PATIENTS AND EXPENDITURES.

Number of patients remaining in the hospital					
January 31, 1892	.	.	.	.	449
Admitted from February 1, 1892, to January 31, 1893:					
Medical	.	.	.	.	3,572
Surgical	.	.	.	.	3,152
Contagious	.	.	.	.	788
Ophthalmic	.	.	.	.	105
Aural	.	.	.	.	78
Gynæcological	.	.	.	.	92
				-----	7,787
Treated during the year	.	.	.	.	8,236
Discharged	"	"	.	.	6,807
Died	"	"	.	.	958
				-----	7,765
Number of patients remaining in the hospital					
January 31, 1893	.	.	.	.	471
Largest number of patients in the hospital at any one time					515

Smallest number of patients in the hospital at any one time	349
Daily average number of patients	433 $\frac{13}{100}$
Average number of days' stay of patients	19 $\frac{24}{100}$
Number of patients accidentally injured, admitted	1,459
Number of weeks' treatment given in hospital,	22,647
Number of days' treatment given in hospital,	158,529
Number of applicants for admission to hospital	9,961
Number of applicants rejected	2,174
Number of patients treated in Convalescent Home	387

Number of patients treated in the out-patient departments, classified according to diseases :

For medical diseases	3,009
“ surgical “	6,803
“ diseases of the eye	1,617
“ “ “ “ ear	471
“ “ “ “ skin	758
“ “ “ women	473
“ “ “ the nervous system	469
“ “ “ the throat	885
<hr/>	
Total number of out-patients	14,485

Number of visits by patients to the out-patient departments, classified according to diseases :

For medical diseases	5,142
“ surgical “	31,133
“ diseases of the eye	6,080
“ “ “ “ ear	2,244
<hr/>	
<i>Carried forward,</i>	44,599

<i>Brought forward,</i>	44,599
For diseases of the skin	1,672
“ “ “ women	1,737
“ “ “ the nervous system	2,194
“ “ “ the throat	2,914
Surgical out-patients treated at accident-room, and not elsewhere included	1,542
<hr/>	
Total number of visits of out-patients	54,658

The entire amount expended for all departments of the hospital during the year was \$255,610.49. Of this amount \$241,514.56 was on account of the hospital proper, \$4,811.89 on account of the eight out-patient departments, \$7,626.15 for the Convalescent Home, and \$1,657.89 on account of determining the settlement of patients.

From the amount expended for the hospital proper, \$241,514.56, should be deducted the difference in the amount of stock on hand January 31, 1893, which was \$3,915.20 more than we possessed on February 1, 1892; making the total amount chargeable to the expenditures of the year \$237,599.36. Of the total amount expended, considerable sums were for purposes not within the ordinary yearly maintenance of the patients. From the itemized table of disbursements it will be seen that there were expended for various items of new and permanent improvements \$6,798.86, which, deducted from the total expenditures of the Hospital Department, leaves \$230,800.50 properly chargeable to current expenses. This amount, divided among 8,236 patients for 22,647 weeks' board, gives \$10.19 as the cost to the city of each patient per week. The weekly cost of each patient at the Convalescent Home has been \$6.50. The Trustees have collected and paid into the city treasury in cash the sum of \$51,900.99, this sum having been received principally on account of board of patients. No allowance has been made for this amount in computing the weekly net cost of each patient to the city.

The maximum number of patients in the hospital at one

time was twenty more than last year; the minimum number was two less than last year; the average number was fourteen more than last year. The average stay of patients in the hospital was $1\frac{7.5}{100}$ days less than last year. The total number of patients treated was 326 greater than last year. The average cost to the city of each patient was \$1.03 less than last year.

The report of the Superintendent, presented herewith, contains, besides other information, a detailed statement of the expenditures of the year and of the number of patients admitted, and is accompanied by the medical and surgical statistics. These reports give in detail the number of patients treated in the hospital, and the number treated in the out-patient departments during the year, with classified statements of their diseases and results of treatment.

PAYING PATIENTS.

During the year there have been collected on account of the board of paying patients of all classes, the following amounts: From State cases, \$27,901.23; from town and city cases, \$6,857.94; from private paying patients, collected by the Superintendent, \$15,429.19; making a total of \$50,188.36.

The Trustees have, as heretofore, deemed it their duty to inquire into the circumstances of all patients admitted to the free wards, with relation to their claims upon the city for support, and also to inquire into the circumstances of each patient as to his ability to pay for the whole or a part of his board. This practice has brought out the fact that large numbers of persons who are not citizens are admitted to the wards, either accidentally injured or suffering from illnesses too grave to permit their removal to the towns where they live, or to the State hospitals when chargeable to the State. The average weekly cost per patient for a series of years has not varied much from \$10 per week. The Trustees have requested the Commonwealth to reimburse the city to the amount of \$7 per week for each State patient, which is \$3 less than the actual cost; but as yet for such cases as the

authorities of the State choose to approve, the city receives only \$5 per week. Even under these conditions, this system of asking for reimbursement has secured from the State \$27,901.23, notwithstanding the fact that the Commonwealth declines to allow and pay for large numbers of patients treated who seem, from expert investigation, to be justly chargeable to the State, and that the city expends more than \$10 per week for the support of State patients, and receives only \$5 per week. The Trustees believe that it is the duty of the Commonwealth to provide for its wards in times of distress and misfortune, as well as it is for Boston to provide for its own, and they deem it but just that a fair return should be received for the service rendered. The claim of \$7 per week made upon cities and towns has been invariably paid without question.

Investigation of the claims of various patients in the ward beds has shown the fact that many patients have very properly declared their reluctance to be supported as charity patients, and when their attention has been called to the matter, have seemed very willing to pay for their own board, and have done so. This is manifest from the increased receipts at the Superintendent's office from paying patients. It is the opinion of the Trustees that this system of voluntary payment should be still further extended, and that patients, as far as is justifiable in each case, should pay something for their treatment in a hospital ward. The tendency of the times is to this result in other hospitals, both private and municipal. The contrast between American hospitals and foreign hospitals in this respect is largely in favor of the former. In foreign hospitals, not excepting those of England, the general sentiment among patients is that they ought to be gratuitously provided for, while the tendency among the occupants of American hospitals is a great willingness to pay, due to a feeling of independence, and a dislike of becoming objects of charity.

It has been generally recognized that the first charity a person in straitened circumstances is ready and willing to receive is medical charity. The first step is thus taken

towards pauperism. As a social problem, the Trustees believe that it is their duty as far as possible to prevent this first step, and to oppose every tendency to pauperism. They therefore deem it their duty to continue the present system of investigation, and whenever it is not a hardship to contribute, to counsel and encourage patients to be wholly or at least partly self-supporting. The Trustees also think that patients who are able to pay, should meet the actual cost of their support, \$10.

PRESENT CAPACITY OF THE HOSPITAL AND NEED OF ADDITIONAL BUILDINGS.

The capacity of the hospital last year was 456 beds. Since the opening of an additional nurses' home, 12 beds in rooms used by nurses have been used for patients. The capacity at this time is, therefore, 468 beds. The daily average number of patients during the year has been 433, and the largest daily number has been 515. The wards have been crowded beyond their normal capacity during most of the winter months, and for ten weeks the daily average was not less than 490 patients. This excess has interfered in many ways with the best running of the hospital, and has most seriously impaired its efficiency. The matter has been more fully set forth in the last two or three annual reports, and the fact still remains more prominent than ever, that either patients having a claim upon the hospital and needing its benefits must be rejected, or the wards must often be crowded altogether beyond the proper limit.

The Trustees have not been satisfied to call the attention of the City Council to the existing condition of things merely by a formal annual report, but the matter was considered of sufficient importance to address a special memorial to the City Council, through your Honor, in regard to the present crowded condition of the hospital, and the need of relief by additional buildings. The matter cannot be better presented than to quote from that memorial :

"The Trustees desire to call the attention of your Honor to the pressing necessity of further appropriations to in-

crease the capacity and usefulness of the City Hospital. Recent hospital reports, as well as special communications addressed to your Honor, and several meetings of the Trustees in conference with the various committees of the City Council, have clearly shown that the present capacity of the hospital and its ability to satisfy modern requirements are not adequate to the demands made upon it for the reception and treatment of patients.

"During the hospital year ending with January 31, 1892, 3,013 applicants for admission were rejected, and for the year ending January 31, 1893, 2,174 applicants were rejected, or a total for the two years of 5,187. All of these applicants, however, were not rejected for want of accommodations, but for various reasons which will be readily seen by reference to the annual reports of the Trustees. There were, however, rejected during the last year, 460 patients, and during the preceding year, 571 patients, or a total of at least 1,031 patients whose cases demanded admission to the hospital, and who should have been received, but were rejected solely for the reason that the hospital was full at the time of their application. The patients rejected were not limited to any particular class, but were both medical and surgical, as well as suffering from contagious diseases, especially measles and scarlet fever. During the present winter, a large number of persons suffering from scarlet fever were rejected, because the scarlet-fever wards were crowded beyond the capacity to receive any more patients. Although a few cases of measles were admitted, a very large number were rejected, because the hospital has no ward devoted to this disease, and the Trustees were not justified in receiving patients with measles to be placed in the wards occupied by patients with ordinary medical and surgical diseases. By reference to the annual reports, as well as to several communications addressed to the City Council, it is obvious that the capacity of the hospital is far less than it should be, and there is very great need of additional wards for nearly all classes of patients. As soon as the Chester Park Hospital for contagious diseases shall be completed,

the two wards now used for diphtheria and scarlet fever can be used for medical cases, which will give an increased accommodation for about sixty medical patients.

"The accommodations for surgical patients, however, have been far less than was necessary for proper cases which should have been admitted. There is great need for two additional wards for the accommodation of surgical patients, on the land at present vacant on the surgical side of the hospital.

"The hospital is in urgent present need of a new building to be especially devoted to surgical operations. The present amphitheatre and its adjoining rooms were constructed seventeen years ago, in 1876. At that time they were fully up to the requirements of the times, and were considered admirable in their arrangement, and have served a most excellent purpose. Methods of surgical work have, however, been changing within the last twelve or fifteen years, and different methods have at different times prevailed. Under modern scientific research, the methods of performing surgical operations have been much improved. The operating rooms should be so constructed that, as far as human ingenuity can devise, they shall be absolutely free from germs which settle and remain in rooms constructed as are the present operating rooms of the hospital. These buildings should be constructed of non-absorbent material; that is to say, the floors should be either of tiles or marble, the wainscoting of marble, the walls of the hardest and least absorbent finish, and the furnishings and utensils should be of glass, iron, or other non-absorbent material.

"There should be, in connection with a modern surgical operating room, additional rooms for the purpose of sterilizing at a high temperature, not only all the instruments, but all dressings, sheets, towels, and even the clothing worn by the surgeon and his assistants. There should be additional facilities for baths and for disinfecting the operator and his assistants. It is impossible properly to prepare for a surgical operation as science now directs, without special facilities for so doing. The accommodations at present existing are

totally inadequate for the purpose, and it is not possible to reconstruct the existing rooms in such a way as to meet the required demands.

"The newer methods at present existing enable the surgeons safely to perform operations which ten years ago were not and could not have been undertaken except with fatal results; but under the existing methods, surgical operations, such as operations upon the abdomen, brain, and other serious capital operations, are done with almost a certainty and a security not before possible.

"Many illustrations of what may be accomplished by modern surgery might be given, but one only will be mentioned. Ten years ago it was the usual practice to amputate every limb with bad compound fractures. Out of a series of 163 such cases treated here under modern methods, 146 patients were discharged from the hospital with their limbs preserved and in good condition.

"The Boston City Hospital cannot treat its patients as well as other first-class hospitals, without suitable buildings and apparatus. Moreover, the city of Boston should not expect that those who are given the trust of caring for its citizens should lag in the rear of modern improvements, as it does at the present time, but should, as it has hitherto, lead in all that conduces to the preservation of life and the bodily welfare of its citizens, especially the working people, who chiefly constitute our patients. The Boston City Hospital, until recent years, has kept in advanced lines in medical and surgical work, but recent scientific methods have outstripped the requirements for doing modern surgical work. Nearly all hospitals, both large and small, now possess rooms, appliances, and utensils, in the line previously indicated, sufficient for the demands of the times. This The Boston City Hospital does not possess, and the Trustees respectfully urge upon the City Council the importance of placing the City Hospital in a thoroughly equipped condition.

"There should be laboratories for doing pathological work, in connection with the surgical treatment demanded and existing in nearly all great modern hospitals. Therefore it is

necessary that the hospital should contain laboratories for the analysis and study of surgical diseases from various points of view.

"The Trustees would recommend that the present one-story surgical building known as Ward P be moved to a location east of its present position, and upon the ground now occupied by Ward P, adjoining the present operating amphitheatre, should be built a building containing new operating rooms. This building must necessarily be of high cost construction. It should be thoroughly fire-proof, built of brick and terra-cotta timber, and as perfect as possible for the purposes of doing modern surgery. The operating rooms, as before stated, should have tiled or marble floors, marble wainscoting, Keene's cement on wire lathing for walls and ceilings, finished with enamel paint. The amphitheatre should not necessarily be large, but should have iron seats and railings for physicians and medical students to witness operations, and there should be absolutely no wood or absorbent material in the room. There should be several small rooms constructed much in the same manner, in order that three different surgeons may operate in three different rooms at the same time. At present the Visiting Surgeons have only one operating room, and oftentimes all three surgeons have to use the same room at once, which leads to delays and annoyances to the surgeons, and has caused many complaints by patients and their friends. This want of space reduces the safety of an operation where cases follow each other in the same room; it leads to confusion, and practically destroys the practice of doing surgical operations after modern ideas, with safety. There should also be in this building rooms where different patients can be etherized separately at the same time. There should be recovery rooms for the proper classification of cases, and also rooms where a class of cases, such as abdominal surgery, operations upon the skull, and other capital operations, can be kept for a few hours or days, not only that they may be free from dust and poisonous germs, but also for quietness and more complete care. This building will require also consulting

rooms for surgeons, rooms devoted to the preparation of bandages and appliances, rooms for sterilizing instruments, and other uses which cannot in detail be entered upon here. The heating and ventilation will require more than the ordinary expenditure, in order to make a perfect system.

"There should be in addition, constructed on the surgical side, on Albany street, near the corner of East Concord street, a long, narrow building, divided into rooms and departments for various purposes connected with surgical work as well as with the hospital in general. The present room for the reception of the dead and for making autopsies is twenty-seven years old. It is antiquated, insufficient in size, and was intended only to meet the requirements of a hospital of 200 beds instead of nearly 500, as at present existing. The means for the preservation of dead bodies until they can be delivered to their friends or be given a proper burial are inadequate and antiquated, and a new series of rooms should be constructed for the reception of the dead, more or less classified according to their condition or the nature of their diseases.

"There should also be erected a mortuary chapel, where religious services may be held, according to the various religious faiths of patients who die at the hospital. At present there is no such place, and we are obliged to use rooms in the out-patient department, which are not suitable, and the use of which is limited to afternoon hours.

"There should also be erected a two-storied building for the isolation of surgical cases, which should be divided into separate rooms. At present, cases of surgical diseases which develop delirium tremens are placed with ordinary medical and surgical cases. This is a great annoyance, and has been the cause of many complaints against the hospital, which the Trustees have been unable to remedy, simply for want of room for proper classification. We have, moreover, no proper place in which to put the large number of alcoholic cases, which, in spite of our rules, we are compelled by humanity to admit.

"The Trustees do not ask for these ways and means

because it is simply a desirable thing to do, or is the professional practice of the times, but they are seriously in earnest that the present inadequate means and methods should be improved upon, and that your hospital should not be stigmatized as being behind the times, unable to do good professional work, because of obsolete methods and wanting in means that can only be supplied by new buildings. Nothing else can suffice, and the Trustees feel they cannot longer take the grave responsibility placed upon them for the proper performance of the work which they are called upon to do.

"After many conferences with the City Architect, the Trustees are of the opinion that the amount necessary to secure the above increased capacity and to erect improved buildings for surgical work will be \$346,000.

"During the year 1892, by means of the annual appropriation and transfers, \$271,000 were placed at the disposal of the Trustees for the construction of new buildings. Of this, \$24,000 was devoted to the construction of the stable, and the remaining amount, as far as contracted for, has been devoted to the new hospital building for contagious diseases on the old City Nursery grounds. Contracts have been made to the amount of \$203,000, and the buildings are now being constructed as rapidly as possible. The contracts made and the appropriations received are insufficient, however, to complete the entire group of buildings necessary to make a complete installation for the treatment of contagious diseases. There will be further required a two-storied ward similar to the one now contracted for and building. There should also be a building which should serve the purpose of a laundry and sterilizing house, with chambers overhead for domestics; and attached to this a proper room for the reception of the dead. There will also be required a nurses' dormitory for the housing of nurses who are assigned to the care of contagious diseases. It is also necessary that the long-talked-of electric plant and boiler-house, sufficient for lighting and heating the contagious buildings, in connection with the entire hospital establishment, should be constructed. The Trustees estimate

that \$127,000 should immediately be appropriated for the further construction of the Chester Park Hospital and the electric plant and boiler-house.

"The attention of the Trustees has been called to the necessity of taking additional precautions against fire. They desire, in order to guard against danger, to construct additional water-mains of sufficient capacity for the increased accommodations, additional hydrants within the hospital grounds, and stand-pipes with proper hose and appliances in all the buildings, and to provide additional fire-extinguishers. Some of the buildings should also have outside iron fire-escapes, and some additional changes of construction should be made in the wards to ensure better means for extinguishing fire. The Trustees are of the opinion that \$5,500 is a minimum sum necessary to carry out these necessary safeguards and improvements.

"The Trustees therefore respectfully request that appropriations be now made for the foregoing purposes, as follows :
For new buildings :

"New surgical wards, surgical operating rooms, and surgical laboratories	\$346,000
Additional for the hospital for contagious diseases and for lighting and heating	127,500
For water-mains, hydrants, stand-pipes, and means of extinguishing fire in present buildings	5,500
	<hr/>
Total	\$479,000
	<hr/>

"The Trustees in making this application deem it of the utmost importance that the sum asked for should be placed at their disposal immediately, so that plans and specifications can be entertained and contracts made in order to commence work at once and the buildings got under way this summer, as, at the best, a year's time will be required for the completion and furnishing of the same."

OUT-PATIENT DEPARTMENTS.

The out-patient departments have been efficiently carried on throughout the year. The improvements made in the buildings, and additional appliances and apparatus furnished, have given the out-patient physicians and surgeons increased facilities for doing the work of their respective departments. The attendance has been large, and the amount of work greater than ever before. These departments, as heretofore, are not treated as feeders for the hospital wards. On the contrary, it is the intention of the Trustees that their management shall conduce to a relief to the wards, and that patients who require treatment, particularly in the various specialties, shall receive the best of service, and a treatment better adapted to their needs than that in the hospital wards.

HOSPITAL FOR CONTAGIOUS DISEASES.

Our wards for diphtheria and scarlet fever continue to place the same dilemmas and difficulties in the way of the proper management of the general wards, as previously pointed out in the annual reports. The beds of these wards have been full nearly all the time. This is particularly true of the scarlet-fever ward. The details of occupancy and management of these wards during the last year are more fully pointed out in the Superintendent's report. It is obvious that wards intended for forty-two patients under proper conditions, cannot be occupied by sixty patients without great detriment and danger. Experience has verified this deduction.

These difficulties, however, will soon be remedied by the completion of the Chester Park Hospital. The Trustees, with the assistance of the Superintendent, have been for many months at work upon plans for a new hospital for contagious diseases. For the purpose of carrying out this work, \$271,000 were placed at the disposal of the Trustees, for the construction of new buildings,—\$24,000 were set apart for the construction of a new ambulance stable, and contracts were made for the buildings constituting the Ches-

ter-Park Hospital, costing \$203,000. The work has progressed during the winter months as rapidly as the weather would permit. Piles and foundations have been laid for a lodge, administration building, domestic building, and one two-story ward. These buildings will be pushed as rapidly as possible during the coming season. It has been impossible to enter upon the construction of all the buildings, because the appropriation was insufficient, and also owing to the fact that, being built upon the City Nursery grounds, the greenhouses could not be abandoned until the coming season. Further appropriations will be necessary before the remaining wing, together with the laundry, nurses' home, and the mortuary necessary for the completion of the group of buildings for infectious diseases, can be constructed.

HOSPITAL RENOVATIONS AND ADDITIONS.

During the past year the usual work has been done upon repairs of the hospital buildings. The alterations at the entrance office are described in detail in the Superintendent's report. These changes have proved of very great benefit and convenience, particularly to the patients who are constantly coming and going.

The most important addition to the hospital buildings during the past year is the ambulance stable, of which a detailed description appears in the Superintendent's report. It is the intention that the stable shall be of a capacity sufficient to meet not only the present wants, but also to provide for the growth of the hospital for some years to come. There is room for twice the number of ambulances now needed in the hospital work, and also double the accommodations necessary for present employés. Special pains has been taken that the building shall be healthy, both for stablemen and horses. The building is not at this date ready for occupation, but is fast approaching completion, and will be ready for use in a few weeks. This improvement has been long needed, and has been often mentioned among urgent necessities of the institution. The completion of the

stable will be followed by a reorganization of the ambulance service, elsewhere referred to, and which has been so long deemed necessary for efficient and prompt transportation.

THE CONVALESCENT HOME.

The Convalescent Home has now been in operation for more than two years, and has rendered the coöperative service which was expected of it in the proper care of the sick. The Home has proved large enough to meet all the requirements, as far as women and children are concerned; but as at present organized, there are no accommodations for convalescent male patients. The Trustees hope that among the additions which the hospital may acquire in the future, there will be another building for the accommodation of male convalescents. The weekly cost per patient at the Convalescent Home has been \$6.50.

ON ESTABLISHING COTTAGE OR BRANCH HOSPITALS IN THE SEVERAL WARDS OF THE CITY.

In response to requests of the two branches of the City Council for information relative to the establishment of cottage or branch hospitals in different portions of the city of Boston, the Trustees made during the past year an extended investigation of the present condition and situation of the various hospitals located in the city of Boston, their situations relative to the different portions of the city, and the needs which they supply; they also examined into the policy pursued by other cities, not only in this country, but in Europe, and the result of their investigation was embodied in a special report made to the City Council, through your Honor, which was published as City Document No. 213. The inquiry was intended to investigate, first, complete local hospitals. This inquiry was considered under special topics; *first*, the present hospital accommodations existing in the city of Boston; *second*, the situation of the various hospitals with reference territorially to the different portions of the city; *third*, the hospital accommodations afforded by other large

cities; *fourth*, the provision made in this country and in Europe for branch or local hospitals; *fifth*, the number of beds required in proportion to the population, in smaller or local hospitals; *sixth*, the cost of establishing smaller or local hospitals; *seventh*, the cost of maintaining smaller or local hospitals.

After presenting the facts in regard to the foregoing topics, and giving tables of statistics of various kinds pertinent to the subject under discussion, the Trustees made the following deductions:

"I. COMPLETE LOCAL HOSPITALS.

"The city of Boston, with its fifteen hospitals accommodating 1,838 patients, occupies, in comparison with the other cities of this country and the cities of Europe, the same leading position which it maintains in respect to other charities.

"Of the fifteen hospitals in Boston, two are municipal, — The Boston City Hospital and the hospital on Long Island. The Boston City Hospital is by far the largest of the fifteen, is located as centrally as could well be, both as to the population and the territory of the city, and it need not, taken all in all, as the Trustees believe, fear comparison with any other in its construction or equipments, or in the care and attendance it offers. It is a great general hospital, befitting the character of the city.

"But few other cities afford a larger number of beds in proportion to their populations, and, as a rule, the great cities afford less. No city provides, at the expense of the municipality, accommodations superior in quantity or quality.

"Not only is the municipal hospital of Boston centrally located, but the various public and private hospitals are as well distributed with reference to the population and the territory of the city as are those of any other city.

"Substantially, no city in this country or in Europe has inaugurated the policy of establishing branch or local hospitals for the remote or different districts of which it is composed. Indeed, the tendency is towards the establishment and building of great metropolitan hospitals.

"If branch or local hospitals are to be established for the accommodation of the sick and wounded of the different outlying districts, the total cost of the establishment of such hospitals in the five districts of East Boston, Charlestown, Brighton, West Roxbury, and Dorchester could not be expected to be less than \$700,000, and the expenses of the maintenance of these hospitals would annually amount to not less than \$127,000.

"The opinion of the Trustees having been requested as to the advisability of establishing such hospitals for certain districts of the city of Boston, they entered upon the consideration of the question without prejudice, and, indeed, without special knowledge upon the subject; and the conclusions at which they have arrived have been reached from a careful consideration of the existing facilities, the situation of the various districts with reference to hospital accommodations, and the necessity of giving to all portions of the city equally the best hospital treatment which can be afforded.

"The views of members of the medical profession in the different districts were sought, and while there was considerable diversity of opinion, the large majority were in favor of local hospitals for their own districts. On the other hand, the opinion of the medical staff of The Boston City Hospital was expressed, in response to the inquiry of the Trustees, as opposed to their establishment.

"The fact that other cities have not inaugurated the policy of providing at municipal expense local hospitals for their different outlying districts is certainly a strong argument against the necessity or feasibility of their establishment here, although it is not by any means a conclusive one. If the policy is deemed unquestionably wise, this city might well decide to take the lead in inaugurating it.

"The Trustees, however, have not been convinced that the establishment of such hospitals is wise for the city, or would conduce to the best interests of the sick and injured of these districts.

"The outlying districts of Boston are not so remote from

The Boston City Hospital and from the other hospitals which open their doors freely to the public, that, through the various means of public transportation and by a proper ambulance system, patients may not reach them without detriment. Serious cases must, in any event, be taken by carriage or ambulance, and the difference of one or two or three miles is not so great as to offset the material advantages accruing to the patient by the additional distance. Indeed, distance from a hospital is not so much a question of miles as it is a question of transportation; and every day the matter of miles is more and more overcome by improvements in transportation. As a matter of fact, also, with one exception, many portions of every outlying district will, by means of the existing means of public communication, be more accessible to the centre of the city than they will be to any one point within the limits of the district. If, for instance, a hospital were established in a central point in West Roxbury, many parts of that district would not be so conveniently accessible to such a hospital as they would be to some hospital in the central section of the city.

"It is certainly true that great hospitals afford, upon the whole, far superior treatment to patients. Patients who can afford the expense seek the great hospitals of Europe in difficult cases. The Massachusetts General Hospital, on account of its superior facilities, attracts patients from all parts of the country, and the same would be the case with The Boston City Hospital, if non-residents of Boston were admitted to its wards.

"In the nature of things, the greater the hospital, if properly managed, the greater must be the facilities afforded. In keeping pace with the times, it acquires all the improved appliances and methods as they appear. It commands for its service the leaders in every department of medicine and surgery, and every difficult case receives the attention of the best talent which the city and indeed the country can afford. It attracts, on account of its greater opportunities for observation and study, the best house physicians for the immediate attendance upon the patients, and for their care it can choose the best class of nursing assistance.

"As its capacity increases, a hospital is able more and more to classify patients, and to give to special diseases the service of men specially skilled in such diseases, and the appliances and surroundings peculiarly adapted for their treatment. To-day the city is constructing at The Boston City Hospital a department for contagious diseases, which will be unsurpassed for its facilities for the treatment and cure of cases not ordinarily received in general hospitals. A great hospital like The Boston City Hospital can classify patients and have wards according to age and sex, different wards for medical and surgical cases, wards for diseases of women and for nervous diseases, for the eye and ear, and diseases of a contagious character, and separate rooms for disorderly and delirious patients, and others requiring isolation. It is only a great hospital that can afford the best appliances and conveniences for the aseptic treatment of surgical cases, by which many injuries formerly regarded as hopelessly fatal are now brought within the pale of successful treatment. A small hospital cannot possibly, of course, have different wards and buildings and different and special attendance for different classes of disease. A great municipal hospital affords to the poorest patient, without price, an amount of professional skill and a degree of trained service which the wealthiest citizen cannot secure at his home.

"So long as it is possible to afford reasonably convenient access to a great metropolitan hospital, its superior facilities for treatment and cure should be extended alike to the citizens of every section of the city needing its care; and, through the building of small or local hospitals, absolutely or substantially to exclude the citizens of certain districts from its benefits might well be charged as an injustice and wrong to them.

"While the question of expense is more for the consideration of the members of the City Council, it is undoubtedly true that such additional beds as may be needed in the future can be obtained from time to time at The Boston City Hospital at an expense much less than the cost of the separate hospitals, and the maintenance of patients, according to the

same standard, would undoubtedly be much less expensive. Besides, each extension of The Boston City Hospital permits and is almost always accompanied by increased classifications of diseases, which benefit greatly the entire body of the citizens.

"If the local hospitals were established, they would undoubtedly be more economically and efficiently conducted under a general hospital management; but it is likely that such management would be attended by difficulties not readily suggested to those unfamiliar with these matters. The appointment of the various staffs and the employment of a sufficient number of competent house-officers, nurses, and employés, and their proper allotment according to the necessities of each hospital at various times, and the impartial distribution of new appliances and improvements as they appear desirable, would not unnaturally lead to delicate questions of administration. The various hospitals would be successively sought by a well-known class of hospital itinerants, who too often strive to live upon a scanty but exaggerated capital of infirmities, chiefly due to their dissipations and indulgences. In these and many other ways, not necessary for discussion here, even with the best of management and the closest coöperation between the central hospital and its local branches, there would be likely to arise a condition of affairs which would give grounds for no inconsiderable amount of criticism and complaint, which would seriously interfere with the efficiency and well-being of central and branch institutions alike. The Trustees suspect that it is these and other difficulties of management inevitable to arise under such conditions, and to the better facilities afforded by larger hospitals, as well as the large expense of erection and annual maintenance, which have hitherto deterred other municipalities from establishing branch hospitals.

"The Trustees are therefore of the opinion that the necessity does not now exist for the establishment of local hospitals for the outlying districts of the city, and that any local benefits which might arise from their establishment would

not be sufficient to offset their disadvantages; and consequently they regard their establishment inadvisable."

II. EMERGENCY HOSPITALS.

The Trustees further investigated the necessity for emergency hospitals, and were "decidedly of the opinion that emergency hospitals of the class considered were not advisable, and, therefore, as they were hardly regarded as desirable by any one whom they consulted, they have not attempted to give a careful statement of the cost of erection and maintenance of such institutions.

III. HOSPITAL STATIONS.

"The Trustees have fully appreciated the fact that the inhabitants of the outlying districts of the city are at considerable disadvantage as to hospital accommodations, in comparison with those citizens whose residences are in the central portions of the city. It must necessarily be that different sections will have greater or less accommodations, according to their nearness to or remoteness from public institutions. It is true, however, as the Trustees fully believe, that the hospital accommodations which are supplied to the citizens of Boston at the municipal expense should be made as accessible as is reasonably possible to every part of the city. When patients are able to take a steam-car or electric-car, it is not a great hardship for the comparatively few patients living in the remote districts to travel the greater distances. Those needy patients who are so ill or are so severely injured as to require transportation should certainly have reasonable means of conveyance afforded them, if inconveniently located as to distance from the municipal hospital."

The Trustees, appreciating the fact that the inhabitants of the outlying districts of the city are necessarily at considerable disadvantage as to hospital accommodations in comparison with those citizens whose residences are in the central portions of the city, were led to make an investigation of the

ambulance system as existing in Boston, with a view "to ascertain and to suggest such improvements in the ambulance system, and otherwise, as will, in their opinion, assist the people, and especially the inhabitants of the outlying districts, and make the hospital accommodations, which the city supplies at the public expense, as nearly as may be, accessible alike to all citizens of the municipality."

They stated as the result of their investigation that "they believe that the ambulance system should be extended, and that the outlying districts of East Boston, Charlestown, Brighton, West Roxbury, and Dorchester should each have an ambulance for its special use, centrally located, and to be used for the conveyance of its sick and injured to The Boston City Hospital, or to such other hospital as the patient desires to reach. They believe that the city should further establish a hospital station in each district, near which the ambulance for that district shall be kept, and to which, in case of emergency, either from accident or from sudden sickness, a call for the ambulance may be made, or to which patients may be taken for the purpose of necessary immediate care, and for a proper permanent disposition. For the purpose of receiving such patients, and for such purpose only, two or three beds and needed appliances should be supplied, and there should always be in attendance a nurse, or other proper person, who will be able to care for and to afford to the sufferer the necessary first aid. In addition, at a certain fixed hour in each day, to be made publicly known, one of the admitting staff of The Boston City Hospital should be present, to whom application may be made for admission to the City Hospital by such patients as can more conveniently apply there than seek the hospital itself. For each district a local relief staff of perhaps two members of the medical profession should be appointed, in connection with the present Hospital Staff, who should be connected with the station by telephone, and who could be immediately called upon in cases of need. It may further be found, upon experience, that a skilled house-officer from The Boston City Hospital should be detailed for service at such station, and

eventually it may also be advisable that an out-patient department should be regularly maintained at the station. Should the hospital station be so provided, it is probable that it could do most of the surgical and medical work which the Police Department is obliged to call for at the various stations, and might save the city a considerable expenditure. The amount spent the past year by the Police Commissioners for 'medical attendance and medicines furnished sick and injured persons' exceeded \$5,200.

"The charge and care of such a hospital station would necessarily belong to The Boston City Hospital Department, but the Trustees are of the opinion that the regular ambulance work might well be done by members of the Police Department, specially detailed for the purpose, and who should carry out the work in much the same manner as the present ambulance work of the department is now performed. Preliminary information and handling of cases of sudden sickness and accidents generally come to the Police Department, and the police necessarily begin the transportation of patients. These hospital stations, if so established, should be located near the police station-houses of the district.

"If the policy of establishing hospital stations is adopted, it would undoubtedly be the better course to proceed at once with the establishment of a single station, and thus ascertain experimentally the best methods for their establishment and management, before proceeding with further stations.

"The cost of establishing a hospital station is of course problematical, and only very general figures can be given in advance of an experiment such as is proposed.

"If there are not quarters in a city building which could be utilized for the purpose, a small house of eight or ten rooms, reasonably adequate for these needs, could probably be obtained. To provide such a house with the required furniture and the proper apparatus and appliances for the special work of the station would cost, say, \$3,000. For maintaining such a station for a year, including rent, wages of nurses and employés, telephone and messenger service, medical and

surgical supplies, food stores, coal, gas, and water, it is roughly estimated that \$5,000 would be needed. Should it be deemed advisable to make the trial, the Trustees would recommend that the sum of \$10,000 should be appropriated to cover the expense of the establishment and maintenance of such a station for a year.

"The Trustees feel called upon to add that it is undoubtedly true, also, that the present ambulance system for the central portions of the city, where, indeed, four-fifths of all the accidents and cases of sudden sickness occur, is far inadequate to the present necessities, and they believe that either the number of police ambulances in these districts should be increased and better methods of summoning them adopted, or that the three great hospitals existing in the centres of hospital needs, The Boston City Hospital, the Massachusetts General Hospital, and the Carney Hospital, should each establish an improved service for the portion of the city more especially within its emergency jurisdiction. The Trustees, indeed, have for years sought and have finally obtained new and additional stable accommodations, by means of which they have desired and now propose to enlarge and improve the ambulance service which this hospital on its part is called upon to perform."

The Trustees concluded their report as follows:

"If measures for the establishment of hospital stations and the enlargement of the ambulance system are carried out, the Trustees are confident that the various sections of the city of Boston will be speedily provided with better hospital accommodations than any other city of this country possesses, that the accommodations which they will afford will thus be provided at the least additional expense, and that thus all the citizens alike will receive the care and treatment not only of The Boston City Hospital, but of the other excellent hospitals which are provided by the liberality of our citizens, and which supply facilities and accommodations far superior to those which could possibly be afforded by local hospitals, however carefully and excellently they might be erected and equipped. The unsurpassed privileges afforded

to the citizens of Boston by the advanced methods and appliances and classifications of diseases, which are improving from day to day, will then be shared alike by all portions of the city.

"A great metropolitan hospital, like The Boston City Hospital, can and certainly should, as its paramount purpose, provide superior care and treatment, and accomplish better results for patients, than can be obtained in any smaller local hospital. It can, however, and does, accomplish much more for the community which it serves. It instructs physicians, young and old, in the most approved methods of treating the sick and injured; it trains, in the highest degree, capable, self-sacrificing women and men as nurses; it affords means for observation and study by which alone medical knowledge and skill can be advanced, and, more than any other philanthropic institution, tends to preserve the health and prolong the lives of all the people, the rich and the poor alike. The Trustees are compelled to the belief that unnecessarily to divide hospitals is retrogression; that to strengthen and concentrate hospital treatment is progress in what most vitally concerns the well-being of every citizen."

THE TRAINING SCHOOL FOR NURSES.

The Training School for Nurses has graduated 301 nurses, of whom 25 have been graduated during the past year. There are now 92 nurses of all grades connected with the hospital. The Trustees have often urged the expediency of increasing the number of nurses, and are happy to record the carrying out of this intention. The proportion of nurses is fully up to the best modern standard of hospital management, and the service rendered by the nurses has been efficient and of a high order. The gradual increase in the number of nurses during the last three years obliged the occupation of the old rooms formerly used by the nurses, as the number of nurses was in excess of the number of beds at the Nurses' Home. The Trustees have temporarily leased a building on East Springfield street, and have altered and

furnished it to suit the requirements of a home for nurses, so that it affords very good accommodation for twenty-four additional nurses.

Among the additional buildings which the Trustees have urged should be constructed in the near future is an additional nurses' home or an enlargement of the present one. The best course would be to take, as the city has a right to do, the houses on the corner of Harrison avenue and East Chester park, and build an extension to the present Nurses' Home. The temporary home alluded to, in its limited way, serves the purpose for the present; but as soon as any additional buildings are used, or as soon as the infectious wards are diverted from their present use to wards for medical and surgical patients, additional accommodations will be required.

During the past year the Trustees have endeavored in every way possible to promote the health, interests, and general welfare of the nurses in the hospital. They have improved the diet at the nurses' table; have supplied additional apparatus for instruction; have given a professional teacher of massage; have increased the number of volumes in the nurses' library, and have placed upon the table of the nurses' parlor more magazines and illustrated papers, and afforded other means of recreation.

The Trustees appreciating their hearty coöperation in the care of the patients, and the amount of physical labor and patience necessary in adequately caring for the patients in the hospital, have been happy to further the interests and well-being of the nurses. The nurses are entitled to the thanks of the Trustees, and of the patients and their friends, for a large share in accomplishing the good results of the year.

THE MEDICAL AND SURGICAL STAFF.

Previous to the present year, there has been no service distinctly devoted to the treatment of diseases of women. Patients admitted to the hospital requiring special treatment were assigned to Ward S, and such patients were taken care of by those of the Visiting Physicians who were especially

interested in that class of practice. Incident to the growth of the hospital, the number of such cases had become so large that it was evident that they should receive special treatment in a ward specially assigned for such service. The Trustees, therefore, during the present year have created a Gynæcological Service. Ward S has been set aside for the special reception of such cases, and John G. Blake, M.D., and Edw. J. Forster, M.D., have been appointed Visiting Physicians for Diseases of Women.

More than the usual number of changes have occurred in the Medical and Surgical Staff. The Trustees regret to chronicle the death of Fitch Edward Oliver, M.D., of the Board of Consulting Physicians and Surgeons, who was one of the first physicians to this hospital, and held that position until 1875. Dr. Oliver was a scholarly physician and an accomplished man, widely known and highly respected. The vacancy caused by the death of Dr. Oliver has been filled by the appointment of Henry W. Williams, M.D., who had recently resigned from active service.

Henry F. Sears, M.D., Pathologist, resigned, and the vacancy was filled by the appointment of Wm. T. Councilman, M.D. Later in the year the title of Pathologist was changed to that of Visiting Pathologist. Francis H. Williams, M.D., and E. M. Buckingham, M.D., Acting Assistant Visiting Physicians, have been appointed Assistant Visiting Physicians. Chas. F. Withington, M.D., Physician to Out-Patients, has been appointed Assistant Visiting Physician. Vincent Y. Bowditch, M.D., and Henry Jackson, M.D., Acting Physicians to Out-Patients, have been appointed Physicians to Out-Patients. George G. Sears, M.D., has been appointed Physician to Out-Patients, A. S. Knight, M.D., has been appointed Medical Registrar, and C. M. Whitney, M.D., Surgical Registrar. Francis I. Proctor, M.D., Assistant to the Ophthalmic Surgeons, resigned.

J. Amory Jeffries, M.D., Assistant Physician for Diseases of the Nervous System to Out-Patients, died March 26, 1892. Although Dr. Jeffries had been but a few years connected with the Out-Patient Staff, he was recognized not only

as an able man in his specialty, but accomplished in other branches of medicine and natural science.

The Trustees desire to make grateful acknowledgments of the fidelity and painstaking labor of the gentlemen composing the Medical and Surgical Staff of the hospital, and take pleasure in acknowledging the experienced skill rendered to the patients of the hospital.

DECEASE OF MR. JOSEPH A. TUCKER.

The Trustees regret to record the death of Mr. Joseph A. Tucker, who was a Trustee of the hospital from January, 1878, to May 1, 1892, a period of fourteen years, and for the last six years the President of the Board. His death occurred on the day following the expiration of his term of service.

The Trustees have placed upon their records the following tribute of respect and appreciation :

"The Trustees of the City Hospital hereby express their appreciation of the loss suffered by the hospital and the community, and their own personal bereavement, in the decease of their late President, Joseph A. Tucker.

"For many years, as Trustee and as President, Mr. Tucker served the hospital faithfully and devotedly, always watchful for its best interests, zealously laboring in its service, and enthusiastic for the increase of its usefulness. His associates will ever cherish the remembrance of his un-failing courtesy and kindness, his integrity and fidelity."

GIFTS AND PERSONAL ASSISTANCE.

The Trustees take pleasure in acknowledging the numerous gifts bestowed upon the hospital and its patients during the past year. Many friends have rendered service to the patients by gifts of fruit, flowers, clothing, books, periodicals, and small sums of money, especially during the holiday season. Hundreds of gifts, largely for children, have not only been sent by individuals, but particularly by groups of young people, [such as the King's Daughters,

classes in Sunday and day schools, and others engaged in philanthropic work. Clergymen, hospital readers, and singers who have furnished vocal music in the wards on Sunday, and other benevolent people, have given charitable and helpful encouragement to patients. To all, the Trustees beg to return their grateful acknowledgments.

The Trustees desire to express their appreciation of the efficient and devoted service given to the hospital by the Superintendent, Dr. Rowe, and of the intelligent and faithful manner in which all his executive assistants have performed their arduous duties.

Respectfully submitted for the Trustees, by

HENRY H. SPRAGUE,
Secretary.

REPORT OF THE SUPERINTENDENT AND RESIDENT PHYSICIAN.

THE BOSTON CITY HOSPITAL, January 31, 1893.

To the Board of Trustees:

GENTLEMEN: I have the honor to present herewith my Annual Report of the Hospital for the year, February 1, 1892, to January 31, 1893, inclusive.

The following table shows the number of patients who have each year applied for admission, and been treated at the hospital:

	Patients examined for ad- mission.	Patients admitted.	Patients accident- ally injured.	Number of out- patients treated.
From June 1, 1864, to December 31, 1864 (7 mos.)	703	475	129	371
From January 1, 1865, to December 31, 1865.....	1,451	1,066	242	1,143
From January 1, 1866, to December 31, 1866.....	1,749	1,432	345	3,324
From January 1, 1867, to December 31, 1867.....	1,913	1,534	328	7,015
From January 1, 1868, to December 31, 1868....	2,729	2,078	417	8,794
From January 1, 1869, to April 30, 1870 (16 mos.).	4,632	3,054	482	11,791
Form May 1, 1870, to April 30, 1871.....	3,977	2,396	525	8,899
From May 1, 1871, to April 30, 1872.....	4,387	2,873	565	8,947
From May 1, 1872, to April 30, 1873.....	4,326	3,304	660	7,526
From May 1, 1873, to April 30, 1874.....	4,250	3,201	804	9,272
From May 1, 1874, to April 30, 1875.....	4,652	3,424	756	8,732
From May 1, 1875, to April 30, 1876.....	4,434	3,180	689	9,413
From May 1, 1876, to April 30, 1877.....	4,713	3,580	663	8,526
From May 1, 1877, to April 30, 1878.....	5,068	4,034	604	9,658
From May 1, 1878, to April 30, 1879.....	5,285	4,323	734	10,419
From May 1, 1879, to April 30, 1880.....	5,444	3,995	505	10,309
From May 1, 1880, to April 30, 1881.....	5,781	4,418	553	10,605
From May 1, 1881, to April 30, 1882.....	5,842	4,107	567	12,035
From May 1, 1882, to April 30, 1883.....	5,991	4,423	666	12,174
From May 1, 1883, to April 30, 1884.....	6,152	4,781	531	14,241
From May 1, 1884, to April 30, 1885.....	6,072	4,831	676	12,005
<i>Carried forward</i>	89,551	66,508	11,441	185,199

	Patients examined for ad- mission.	Patients admitted.	Patients accident- ally injured.	Number of out- patients treated.
<i>Brought forward</i>	89,551	66,508	11,441	185,199
From May 1, 1885, to December 31, 1885 (8 mos.)	3,965	3,229	562	8,271
From January 1, 1886, to December 31, 1886	6,086	5,046	757	12,733
From January 1, 1887, to December 31, 1887	6,682	5,577	790	13,124
From January 1, 1888, to December 31, 1888	7,406	5,875	709	13,383
From January 1, 1889, to December 31, 1889	8,274	6,157	888	13,605
From January 1, 1890, to December 31, 1890	8,101	6,473	1,079	12,983
From January 1, 1891, to January 31, 1892(13 mos.)	10,507	7,494	1,331	15,560
From February 1, 1892, to January 31, 1893	9,961	7,787	1,459	14,485
Totals	150,533	114,146	19,016	289,343

NUMBER OF PATIENTS TREATED EACH YEAR AND RATE OF MORTALITY.

	No. of Patients Treated.	Died.	Rate of Mortality.
1864, 7 months, ending Dec. 31 .	475	47	.099
1865, year ending Dec. 31 .	1,167	97	.083
1866, " " " .	1,549	123	.080
1867, " " " .	1,697	146	.086
1868, " " " .	2,219	163	.073
1870, 16 months, ending April 30, .	3,235	246	.076
1871, year ending April 30 .	2,569	215	.083
1872, " " " .	3,054	247	.080
1873, " " " .	2,527	351	.099
1874, " " " .	3,435	282	.082
1875, " " " .	3,662	91	.079
1876, " " " .	3,421	290	.084
1877, " " " .	3,843	287	.074
1878, " " " .	4,434	311	.071
1879, " " " .	4,631	347	.074
1880, " " " .	4,298	401	.093
1881, " " " .	4,708	421	.089
1882, " " " .	4,382	415	.094
1883, " " " .	4,702	473	.100
1884, " " " .	5,061	476	.094

1885, year ending April 30 . . .	5,167	513	.094
1885, 8 months, ending Dec. 31 . . .	3,550	363	.102
1886, year ending Dec. 31 . . .	5,368	603	.110
1887, " " " . . .	5,937	623	.104
1888, " " " . . .	6,227	772	.123
1889, " " " . . .	6,502	804	.123
1890, " " " . . .	6,853	752	.109
1891, 13 months, ending Jan. 31,			
1892	7,910	852	.107
1892-3, year ending Jan. 31, 1893,	8,236	958	.116

Patients admitted to the hospital :

Medical services	3,572
Surgical services	3,152
Contagious service	788
Ophthalmic service	105
Aural service	78
Gynæcological service	92
<hr/>	
Total	7,787

Patients who visited the hospital for advice and treatment in the out-patient departments :

Medical diseases	3,009
Surgical diseases	6,803
Diseases of the eye	1,617
Diseases of the ear	471
Diseases of the skin	758
Diseases of women	473
Diseases of the nervous system	469
Diseases of the throat	885
<hr/>	
Total	14,485
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NUMBER OF VISITS MADE BY OUT-PATIENTS TO HOSPITAL.

Year.	Month.	Medical.	Surgical.	Eye.	Ear.	Skin.	Women.	Nervous.	Throat.	Total.
1892.	February.....	365	2,127	559	305	147	171	179	261	4,114
	March.....	432	2,529	556	292	172	155	194	385	4,715
	April.....	459	2,766	696	199	169	176	273	329	5,067
	May.....	462	2,701	600	147	175	190	242	259	4,776
	June.....	433	2,808	227	225	117	148	190	206	4,354
	July.....	464	2,920	529	131	128	122	216	179	4,689
	August.....	479	3,477	523	154	152	121	222	201	5,329
	September ...	460	2,754	494	171	152	130	153	181	4,495
	October.....	505	2,636	455	188	109	153	135	247	4,428
	November....	354	2,351	462	140	119	165	130	250	3,971
	December....	325	1,997	474	134	114	125	136	213	3,518
1893.	January.....	404	2,067	505	158	118	81	124	203	3,660
		5,142	31,133	6,080	2,244	1,672	1,737	2,194	2,914	53,116
Surgical out-patients treated in the accident-room, not classified elsewhere.....										1,542
Total.....										54,658

APPLICANTS EXAMINED FOR ADMISSION DURING THE YEAR.

Year.	Month.	Number examined.	Number admitted.	Number not admitted.
1892.	February.....	873	639	234
	March.....	892	678	214
	April.....	972	673	299
	May.....	937	695	242
	June.....	776	632	144
	July.....	835	695	140
	August.....	724	614	110
	September.....	730	606	124
	October.....	777	613	164
	November.....	769	635	134
	December.....	761	629	132
1893.	January.....	915	678	237
	Total.....	9,961	7,787	2,174

APPLICANTS NOT ADMITTED DURING THE YEAR.

Cause of Rejection.	1892. February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	1893. January.	Total.
For want of accommodation	70	70	85	78	10	3	1	4	23	16	19	81	460
Ditto, but admitted within three days	24	11	20	12	5	1	0	0	0	1	4	9	87
Referred to Out-patient de- partments.....	13	17	32	19	23	20	15	20	17	13	12	21	222
Non-resident.....	10	12	19	10	10	10	7	14	18	13	10	12	145
No claim.....	23	16	28	20	20	13	4	8	14	15	4	4	169
Self-rejected or deferred....	36	27	38	30	27	18	20	15	19	19	15	16	280
Chronic or incurable	13	10	13	8	6	13	7	6	11	8	10	14	119
Phthisis.....	1	6	6	6	2	9	5	1	7	3	0	5	51
Delirium tremens and alco- holism	5	4	13	13	10	14	16	20	19	7	16	20	157
Venereal.....	15	10	6	11	7	9	16	16	14	9	12	6	131
Pregnancy	2	2	0	2	0	1	2	1	1	0	0	0	11
No disease or malingerers..	3	5	2	1	0	1	1	0	0	2	0	7	22
Insane or mental.....	0	0	2	1	1	2	1	2	5	2	2	6	24
To other appropriate insti- tutions.....	6	6	12	8	5	11	9	9	9	10	11	18	114
Miscellaneous.....	13	18	23	23	18	15	6	8	7	16	17	18	182
Total	234	214	299	242	144	140	110	124	164	134	132	237	2,174

RECORD OF AMBULANCE WORK.

IN BRINGING PATIENTS IN.

Trips to	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	January.	Total.
Business centre.....	10	10	8	21	5	9	8	5	6	11	10	11	114
North End	13	18	15	19	22	12	8	12	6	17	8	21	171
West End	16	18	8	12	18	11	15	16	17	22	17	24	194
Back Bay	6	3	1	4	5	1	0	0	0	4	6	6	36
South End	56	56	44	62	33	28	30	36	26	34	47	52	504
Roxbury	15	13	27	27	12	21	19	20	29	30	25	27	265
Dorchester	11	6	11	7	7	8	5	6	6	7	14	11	99
South Boston.....	22	25	31	32	31	18	17	23	25	24	24	19	291
East Boston	8	3	7	8	4	9	9	10	10	7	19	6	100
Charlestown	5	5	10	9	5	7	9	9	6	6	3	8	82
Jamaica Plain	2	2	1	3	1	2	2	2	3	7	6	5	36
Brighton	0	2	2	5	3	0	1	1	2	1	1	1	19
Neponset... ..	2	0	2	1	1	1	0	2	1	0	0	0	10
Total trips in.....	166	161	167	210	147	127	123	142	137	170	180	191	1,921
Brought extra	0	5	3	4	5	5	2	1	2	3	0	1	31
Did not come.....	7	4	4	3	0	4	6	4	6	1	6	6	51
Patients brought.....	159	162	166	211	152	128	119	139	133	172	174	186	1,901

IN CARRYING PATIENTS OUT.

Trips to													
Convalescent Home...	8	5	7	4	3	3	1	3	3	4	5	4	50
Public Institutions	2	5	2	1	0	5	5	3	4	8	6	6	47
Patients' homes.....	5	9	2	5	1	1	1	1	1	1	3	3	33
Other hospitals	4	0	1	1	0	1	1	1	0	2	0	1	12
Total trips out.....	19	19	12	11	4	10	8	8	8	15	14	14	142
Carried extra.....	30	20	19	16	13	5	7	7	9	10	15	13	164
Patients carried	49	39	31	27	17	15	15	15	17	25	29	27	306

SUMMARIES.

Total No. of trips	185	180	179	221	151	137	131	150	145	185	194	205	2,063
Total patients transferred	208	201	197	238	169	143	134	154	150	197	203	213	2,207

EMPLOYMENT OF PATIENTS ADMITTED DURING THE YEAR.

MALES.

Actors	10	<i>Brought forward</i>	869
Advertisers	4	Druggists	3
Agents	11	Dyers	3
Apprentices	3	Electricians	8
Architect	1	Engineers	44
Artists	3	Engravers	3
Athlete	1	Errand-boys	26
Bakers	34	Expressmen	12
Barbers	34	Factory operatives	76
Bartenders	38	Farmers	22
Blacksmiths	53	Firemen	48
Boiler-makers	19	Fishermen	11
Bookbinders	12	Foremen	7
Book-keepers	12	Florists	5
Bootblacks	11	Gardeners	12
Bottlers	14	Gas-fitters	4
Brakemen	17	Gilder	1
Brass-workers	10	Glass-blowers	2
Brewers	3	Glaziers	3
Bricklayers	15	Grocers	9
Brokers	4	Harness-makers	14
Butchers	19	Hatters	3
Butlers	2	Hostlers	37
Cabinet-makers	18	Icemen	4
Calkers	2	Inspectors	6
Canvassers	8	Iron-workers	26
Carpenters	201	Janitors	16
Carriage-builders	4	Jewellers	7
Cashier	1	Junk-dealers	6
Cigar-makers	10	Laborers	1,034
Clergymen	2	Lathers	6
Clerks	115	Laundrymen	10
Coachmen	23	Lawyers	8
Collectors	7	Leather-worker	1
Commercial travellers	9	Letter-carriers	4
Compositors	4	Linemen	10
Conductors	12	Lithographer	1
Confectioners	7	Locksmiths	3
Cooks	43	Longshoremen	54
Coopers	16	Lumberman	1
Coppersmiths	3	Machinists	60
Curriers	8	Manufacturers	9
Cutler	1	Marble-workers	8
Detective	1	Masons	36
Drivers	44	Mechanics	6
<i>Carried forward</i>	869	<i>Carried forward</i>	2,538

<i>Brought forward</i>	2,538
Merchants	35
Messengers	9
Milkmen	2
Mill men	3
Moulders	18
Musicians	6
Newsboys	7
Nurses	22
Optician	1
Packers	8
Painters	120
Paper-hangers	3
Pattern-makers	4
Pavers	2
Pedlers	62
Photographers	4
Physicians	13
Piano-makers	19
Piano-tuner	1
Plasterers	12
Plumbers	34
Police-officers	9
Polishers	23
Porters	28
Pressmen	2
Printers	52
Quarrymen	3
Railroad men	5
Reporter	1
Roofers	15
Rope-makers	6

Carried forward

<i>Brought forward</i>	3,067
Sailmaker	1
Salesmen	30
Sawyer	1
Scholars	419
Seamen	89
Ship-rigger	1
Shippers	7
Shoemakers	56
Stable-keepers	3
Steam-fitters	10
Stenographer	1
Stewards	12
Stonecutters	23
Surveyor	1
Tailors	70
Tanners	2
Teachers	11
Teamsters	261
Telegraph operators	2
Tinsmiths	9
Undertakers	3
Upholsterers	10
Varnishers	5
Waiters	55
Watchmen	13
Weavers	4
Wheelwrights	2
Woodworkers	6
Not classified	296
No occupation	249

Total

FEMALES.

Actresses	3
Artists	3
Bookbinders	5
Book-keepers	6
Canvassers	2
Cashiers	2
Chambermaids	22
Clerks	14
Compositors	3
Cooks	119
Domestics	696
Dressmakers	54
Factory operatives	44

Carried forward

<i>Brought forward</i>	973
Housekeepers	154
Housewives	843
Laundresses	71
Milliners	4
Nurses	77
Nursery maids	11
Pedlers	2
Sales-girls	18
School-girls	348
Seamstresses	60
Stenographers	3
Tailoresses	39

Carried forward,

<i>Brought forward,</i>	2,603	<i>Brought forward,</i>	2,699
Teachers	4	Ward-maids	11
Telegraph operators	2	Not classified	146
Type-setter	1	No occupation	212
Waitresses	89		
	<hr/>	Total	3,068
<i>Carried forward,</i>	2,699		

NATIVITY OF PATIENTS ADMITTED DURING THE YEAR.

Boston	1,646	<i>Brought forward</i>	7,449
Other towns in Massachusetts,	649	China	9
Maine.....	279	Asia	8
New Hampshire.....	102	Switzerland	5
Vermont	51	Wales	5
Rhode Island	38	Portugal	4
Connecticut	36	Holland	4
District of Columbia	8	South America.....	4
Middle Atlantic States.....	210	Roumania	4
Central States	102	Belgium.....	3
Southern States.....	81	Finland	3
Pacific States.....	10	Turkey	2
British Provinces	928	Armenia	2
Ireland	2,098	India	2
England.....	323	Barbadoes.....	2
Russia	199	Bohemia	2
Germany	172	East Indies	2
Scotland	127	Prussia	2
Sweden	123	Spain	2
Italy.....	119	Africa	1
Poland	39	Azores	1
Norway	26	Australia	1
West Indies	26	Japan	1
Denmark.....	22	Mexico.....	1
France.....	17	At sea	5
Austria.....	9	Unknown	263
Hungary	9		
	<hr/>	Total	7,787
<i>Carried forward</i>	7,449		

AGES OF PATIENTS ADMITTED DURING THE YEAR.

MALES.

Under 12 months.....	36	<i>Brought forward</i>	3,899
From 1 to 5 years	157	From 50 to 60 years	423
“ 5 to 10 “	191	“ 60 to 70 “	212
“ 10 to 20 “	459	“ 70 to 80 “	68
“ 20 to 30 “	1,376	“ 80 to 90 “	16
“ 30 to 40 “	998	“ 90 to 100 “	2
“ 40 to 50 “	682	Unknown	99
	<hr/>		
<i>Carried forward</i>	3,899	Total	4,719

FEMALES.

Under 12 months.....	29	<i>Brought forward</i>	2,595
From 1 to 5 years	169	From 50 to 60 years	222
“ 5 to 10 “	203	“ 60 to 70 “	137
“ 10 to 20 “	343	“ 70 to 80 “	46
“ 20 to 30 “	970	“ 80 to 90 “	7
“ 30 to 40 “	554	Unknown.....	61
“ 40 to 50 “	327		
	<hr/>	Total	3,068
<i>Carried forward</i>	2,595		

CIVIL CONDITION.

MALES.

Married	1,452
Single	2,775
Widowers	380
Unknown	112
	<hr/>
Total	4,719

FEMALES.

Married	987
Single	1,555
Widows	453
Unknown	73
	<hr/>
Total	3,068

CONDITION OF PATIENTS DISCHARGED.

Well	2,392	Died	958
Relieved	4,023	Eloped	15
Not relieved....	268		<hr/>
Not treated	109	Total	7,765

DISBURSEMENTS FROM FEBRUARY 1, 1892, TO JANUARY 31, 1893.

ARTICLES.	Quantity.	Cost.	Average Price.
SUBSISTENCE SUPPLIES.			
Beef	174,559 lbs.	\$18,114 35	\$.103 per lb.
Mutton and Lamb.....	50,695 "	5,715 03	.112 "
Veal.....	1,388 "	156 26	.112 "
Fowl.....	59,560 "	9,928 92	.166 "
Pork and Hams	16,740 "	1,766 33	.105 "
Lard.....	4,384 "	345 29	.078 "
Butter.....	24,373 "	6,577 50	.269 "
Cheese.....	1,464 "	184 80	.126 "
Eggs.....	17,242 doz.	3,978 11	.230 per doz.
Vegetables.....		4,419 55	
Fish		2,295 32	
Groceries... ..		11,051 63	
Flour.....	981 bbls.	4,616 55	4.70 per bbl.
Milk.....	42,421 cans.	13,715 72	.323 per can.
Total		\$82,865 36	
FUEL.			
Coal .....\$12,747 00	2,327 $\frac{52}{2240}$ tons.		5.47 per ton.
Wood and Charcoal..... 210 00		12,957 00	
MEDICAL SUPPLIES.			
Surgical Appliances.....	\$1,009 45		
Medicine and Drugs.....	3,057 02		
Surgical Instruments.....	1,356 56		
Druggists' Sundries.....	1,099 80		
Alcohol.....	274 63		
Liquors.....	3,758 23		
Malt Liquors.....	580 22		
Surgical Dressings	10,091 00		
Oxygen Gas.....	479 00		
Sulphuric Ether.....	923 40		
		22,629 31	
SALARIES AND LABOR.			
Salaries and Labor.....		66,854 06	
BUILDINGS.			
General Repairs.....	\$10,138 47		
Additions and Alterations to Entrance Office..	4,179 92		
Boilers and Heating Apparatus	2,545 61		
Plumbing.....	1,047 34		
Laundry Machinery and Alterations.....	2,212 12		
		20,123 46	
Carried forward.....		\$205,429 19	

DISBURSEMENTS FROM FEBRUARY 1, 1892, TO JANUARY 31, 1893.—*Continued.*

ARTICLES.	Cost.	Totals.
<i>Brought forward</i>		\$205,429 19
GROUNDS.		
Grounds, Fences, etc.....	\$1,152 24	1,152 24
GENERAL SUPPLIES.		
Ice, 671 565-2000 tons.....	\$1,342 58	
Water, 2,112,000 feet.....	2,573 40	
Gas.....	5,539 00	
Furniture.....	1,118 66	
Furnishing.....	4,714 82	
Fixtures.....	660 40	
Beds and Bedding.....	6,034 47	
Dry Goods and Clothing.....	2,558 89	
Medical Library.....	1,061 31	
Printing.....	1,222 27	
Annual Reports.....	331 08	
Stationery.....	1,128 85	
Advertising.....	134 61	
Telephone Rentals.....	\$305 94	
Telegraph and Messengers.....	71 23	
Electrical Appliances, Repairs, Medical Batteries, etc.....	348 12	
	725 29	
Stable, including Ambulance Service.....	2,895 12	
Tents.....	607 49	
Watering Streets.....	62 50	
Cooking School for Nurses....	120 00	
Nurses' Home	208 91	
"The Nightingale," Furniture, Furnishing, including Rental.....	1,557 63	
Expense incurred in ascertaining Settlement of Patients...	1,657 89	
Incidentals not otherwise classified.....	335 85	
		36,591 02
Total expenditures in maintaining the Hospital proper for the year ending January 31, 1893.....		\$243,172 45
OUT-PATIENT DEPARTMENTS.		
Coal.....	\$948 40	
Gas	274 05	
Wages	934 16	
Surgical Dressings and Supplies.....	2,176 10	
Surgical Instruments	329 77	
Printing and Stationery.....	73 20	
Furnishings	76 21	
		4,811 89
<i>Carried forward</i>		\$247,984 34

DISBURSEMENTS FROM FEBRUARY 1, 1892, TO JANUARY 31, 1893.—*Concluded.*

ARTICLES.	Cost.	Totals.
<i>Brought forward</i>		\$247,984 34
CONVALESCENT HOME.		
Salaries and Labor.....	\$2,236 64	
Subsistence Supplies.....	2,998 74	
Coal	410 83	
Gas	180 90	
Water	82 60	
Ice	169 20	
Furniture and Furnishing.....	141 05	
Dry Goods	110 87	
Telephone Rentals and Electric Repairs ...	115 37	
Medical Supplies	96 72	
Liquors.....	12 50	
Repairs.....	342 77	
Care of Grounds.....	417 03	
Stable and Live-stock.....	155 69	
Freight and Express.....	89 25	
Incidentals	65 99	7,626 15
Total expenditures for all departments.....		\$255,610 49
Stock on Hand February 1, 1892	\$1,975 30	
Medical Supplies ..	2,150 05	
Liquors	567 35	4,692 70
Total expenditures for all purposes.....		\$260,303 19
DEDUCT.		
<i>Stock on Hand Feb. 1, 1893.</i>		
General Supplies.....	\$6,136 32	
Medical Supplies	2,044 83	
Liquors	426 75	
Additions and Alterations to Entrance Office,	\$4,179 92	\$8,607 90
Medical Library	1,061 31	
"The Nightingale," Furniture, Furnishing, including Rental.....	1,557 63	
Expense incurred in ascertaining Settlement of Patients.....	1,657 89	
Out-Patient Departments	8,456 75	
Convalescent Home.....	4,811 89	
Income from Paying Patients.....	7,626 15	
Interest from Trust Funds.....	\$50,188 36	
Sale of Old Material	1,550 00	
Net Cost to the City for maintaining Hospital proper from February 1, 1892, to January 31, 1893, inclusive	162 63	51,900 99
		81,403 68
		\$178,899 51

RÉSUMÉ OF FINANCES FOR YEAR.

Stock on hand February 1, 1892,	\$4,692 70	
Expenditures for hospital proper	241,514 56	
Expenditures for out-patient departments	4,811 89	
Expenditures for Convalescent Home	7,626 15	
Expenditures for settlement account	1,657 89	
Income from all sources .		\$51,900 99
New and permanent improvements at the hospital proper,		6,798 86
Expenses of settlement account		1,657 89
Maintaining out-patient departments		4,811 89
Maintaining Convalescent Home,		7,626 15
Stock on hand February 1, 1893,		8,607 90
Net cost to the city for maintaining hospital proper .		178,899 51
	<hr/>	<hr/>
	\$260,303 19	\$260,303 19

The foregoing table of disbursements shows that the total expenditures by the Hospital Department during the fiscal year February 1, 1892, to January 31, 1893, inclusive, were \$255,610.49. This sum was divided among the three departments as follows: For the hospital proper, \$243,172.45; for maintaining the out-patient departments, \$4,811.89; for maintaining the Convalescent Home, \$7,626.15.

The expenditures for the hospital were partly for ordinary maintenance, and partly for permanent improvements. There was expended for the alteration and reconstruction of the entrance office, \$4,179.92; for purposes of the medical library, including the indexing of cases, \$1,061.31; for furnishing and altering the house No. 57 East Spring-

field street for an additional Nurses' Home, including rent of the same, \$1,557.63. There has also been expended for investigating the settlement of patients the sum of \$1,657.89. None of the above items should be included in the cost of the care and treatment of patients in the wards. These expenditures make a total of \$8,456.75, which, deducted from the gross expenditures of the hospital proper, leaves \$234,715.70 for current expenses. There should also be deducted the difference in the stock at the beginning and close of the year, making \$230,800.50 as the actual cost of maintenance for the year ending January 31, 1893. This sum was expended upon the care of 8,236 patients in the wards, for 158,529 days' board, or 22,647 weeks, and makes an average weekly cost of \$10.19 per hospital patient of all classes, against \$10.22 for the previous year. The total cost of maintenance and the weekly cost per patient, \$10.19, represent the items of hospital statistics usually given in the hospital finances.

There has been collected and paid into the city treasury during the year \$50,188.36, collected on account of the board of all classes of paying patients, as follows :

From State cases	\$27,901 23
From town and city cases	6,857 94
From private patients	15,429 19
	<hr/>
Total	\$50,188 36
	<hr/>

There has been received \$1,550 interest from trust funds for the support of free beds, and \$162.63 from the sale of old materials. These sums, amounting to \$51,900.99, were paid in cash to the city treasury, and should be credited to the appropriation received. This reduces the net cost to the city for the Hospital Department for all purposes during the fiscal year to the sum of \$178,899.51.

The expenditure upon 14,485 out-patients has been \$4,811.89.

The total expenditures upon the Convalescent Home have been \$7,626.15. The benefits of the Home have been given to 387 persons, who have received in all 8,204 days' board, or 1,172 weeks, at a weekly average cost of \$6.50 per patient.

Statistics of the number of out-patients, the number of their visits, the rates of mortality, the work of the ambulances, the occupation, nativity, ages, civil condition, and physical condition of patients when discharged, are elsewhere tabulated, and may prove of interest in connection with hospital data.

The maximum number of patients on any one day was 515, against 495 last year; the minimum number, 349, against 351 last year; the daily average during the year was $433\frac{13}{100}$, against $419\frac{34}{100}$ last year, being 13 more. The average length of stay was 19.24 days, against 20.99 last year. The number of accident cases received was 1,459, against 1,331 last year (13 months).

The total number of deaths from February 1, 1892, to January 31, 1893, was 958.

Of the deaths, there occurred within forty-eight

hours of admission	392, or .048
From diphtheria alone	185, or .022
From all other causes	381, or .046
	<hr/>
Total of deaths	958, or .116

the rate of mortality for the year ending January 31, 1893. The percentage of deaths given is for the total number of patients treated in the hospital.

Of all patients admitted, 392 died within forty-eight hours after admission, which indicates that they were brought to the hospital in a dying condition, and medical aid could not change the result.

During the year, 8,236 patients have been treated in the wards, 14,485 as out-patients and 387 at the Convalescent Home — a total of 23,108 who have received the benefits of the hospital in all departments.

During the year, 9,961 persons applied for admission. Of this number, 7,787 were admitted, and 2,174 were rejected, or 839 less than last year. Of the number rejected, 222 were referred to the various out-patient departments, where their cases could be suitably provided for without detriment to the patients. Many of these would undoubtedly have been admitted if they had not applied when the hospital beds were full. Among the number examined for admission, 547 were rejected for want of accommodations, but 87 of this number were received within three days, leaving 460 persons rejected solely for want of room. There were 314 rejected because they were either non-residents or had no claim upon the city of Boston, and the necessities of their cases did not require setting aside the rule. It is noticeable that among patients applying there is a largely increased number of those who are victims of vice, and who seek admission to the hospital either suffering only from the effects of alcohol or venereal disease. These cases are not admitted under the rules, except when they are so complicated by other physical conditions as to make the exigencies paramount to the rule. There were 114 applicants who were apparently more suitable for an almshouse than for a hospital. Of the number applying, 280 either changed their minds or did not renew their applications. The other causes of rejection appear in table of applicants not admitted during the year, on page 43.

The capacity of the hospital is 468 beds, while the daily average has been 433, or 14 more than last year. For convenience of comparison the following tabular form is given, showing comparative statistics, and more clearly indicating the amount and character of the work.

TABULAR FORM SHOWING COMPARATIVE STATISTICS IN
MOVEMENT OF PATIENTS, ETC.

	1886.	1887.	1888.	1889.	1890.	1891.	1892-3.
Applicants for admission ...	6,086	6,682	7,406	8,274	8,101	9,666	9,961
Patients admitted.....	5,046	5,577	5,875	6,157	6,473	6,896	7,787
Patients treated.	5,368	5,937	6,227	6,502	6,853	7,312	8,236
Out-patients treated	13,614	14,318	14,626	14,894	14,258	14,536	16,027
Patients at Convalescent Home					32	407	387
Total patients treated.....	18,982	20,255	20,853	21,396	21,111	22,255	24,650
Maximum number on any one day	391	392	441	428	432	484	515
Minimum number on any one day	311	300	320	327	320	351	349
Daily average in wards	344	354	378	370	384	416	433
Average length of stay in days.....	23.39	21.76	22.21	21.	20.46	20.76	19.24
Accident cases received.....	881	790	709	888	1,079	1,233	1,459
Patients carried in ambulances			1,044	1,321	1,457	1,925	2,207
Number of deaths	603	623	772	804	752	761	958
Visits of out-patients.....	41,451	48,524	46,083	49,593	50,123	51,395	54,658
Number of patients rejected	1,040	1,105	1,531	2,117	1,628	2,770	2,174

The hospital management has been obliged to resort to every available means, in order to accommodate the increased number of patients who have been admitted. This has been accomplished at considerable inconvenience, in many cases by unduly crowding the wards or associated rooms not intended for patients. This condition was more fully indicated in the last annual report, and the experience of another year emphasizes the fact that more beds are needed for the proper accommodation of ward patients. This hospital is called upon to receive a larger number of patients than it might otherwise, from the fact that it is a municipal hospital, supported from the tax levy of the city, and must provide for urgent and pressing cases; whereas it would not be obliged to pursue the same policy if it were a private institution. Being compelled to receive a larger

number of patients than can be accommodated properly, results in causing patients to be discharged much sooner than is desirable. Sometimes this has been to the detriment of the patient, and has caused criticism where the hospital management had no opportunity to explain the reason. The accommodations of the hospital have not kept pace with the large amount of sickness and surgical injuries inevitable with the growth of the city, and until they are increased we must continue to reject many who are fairly entitled to its benefits.

The strain caused by crowding has been perceptible not only in the increased work necessary for the executive department, the medical and surgical staff and nursing service, but all branches of the hospital have severely felt the pressure. Good professional work can only be properly done when deliberate and careful thought in all directions is bestowed upon it. Work incident to the care of sixteen wards cannot be suitably done when those wards have patients sufficient for eighteen wards.

The Contagious Service has been extremely active, a larger number of patients having been admitted than during any previous year. The total number of patients admitted with scarlet fever, diphtheria, and other complications was 788. Of this number, 383 had diphtheria, 245 had scarlet fever, 89 had scarlet fever and diphtheria, and the remaining number various complications not otherwise classified.

The diphtheria ward has seldom been crowded, although during several months it has been full. The character of the cases has been severe, the marked characteristic being that a very large number were brought to the hospital in the last extremity. It follows that the mortality has been large. The scarlet-fever ward has not only been full at all times, but during the winter months it has been crowded beyond a limit that was judicious. The hospital attempted to provide for all cases of scarlet fever that have applied for relief. The normal capacity of the ward is twenty-eight adults. Allowing for the fact that a large number of the patients are children, and including the chambers intended as special isolating

rooms, the full capacity may be said to be forty-two beds. At times, however, there have been sixty patients under treatment at one time, for many weeks. Some applicants have been rejected, because the wards were crowded to an extent detrimental to those under treatment. There have been epidemics of scarlet fever in nearly all the homes and institutions devoted to the care of children; and generally we have been able to relieve them of pronounced or suspected cases of scarlet fever, but occasionally we have been obliged to deny them admission for want of room. This has caused great hardships to these institutions, and has contributed to the sickness among the other inmates. This is the first time during the six years the contagious wards have been occupied that any patients having a claim have been refused admission for want of room. When the new hospital for contagious diseases, now in process of erection on East Chester Park, is completed, it is expected that its capacity will meet not only the present demands, but also provide for any epidemic hitherto existing in Boston, and also keep pace with growth of population.

The creation of the Contagious Service, and the isolation of both physicians, nurses, and others who do duty in the contagious wards, which measure was thoroughly insisted upon last year, has been found to work greatly to the advantage of the hospital. But it is still attended with so many difficulties as to be a source of anxiety and difficult of management. The amount of the work rendered by the house staff and nursing force has been large and the quality excellent.

The out-patient departments have done most efficient work during the last year. The new building has been found to meet the wants of the various departments with increased facilities and ease of work. The patients have received a large amount of service, and more accurate and scientific methods have been used in the treatment of cases. The heating and ventilation of the buildings have been most excellent, and at all times, even when the rooms have been crowded during rainy weather, under conditions that severely test an out-patient department, the quality of the air has

been good and the supply plentiful. This has been especially comfortable for the physicians and house staff, who ordinarily in out-patient departments have to work many hours in an unhealthy atmosphere. The building for the Surgical Out-Patient Department, which for the first time since the alterations and additions was used during the past year, has afforded greater conveniences and comforts for work. There has been a great increase both in the number of patients and the number of visits made to this department, and the number of dressings done daily has sometimes been double what it was a few years ago.

During the year, considerable work has been done in the way of alterations and repairs. The most important was the reconstruction at the entrance office, which has been done at an expense of \$4,179.92. The stone steps which were originally placed at the entrance office have been taken away and the floor of the office lowered so that it is now only necessary for visitors and patients to take one step up in coming into the hospital grounds. Several other changes were made which not only increased the usefulness of the office, but also improved its appearance.

Additional machinery has been put in the laundry, and a new high-pressure boiler added. By means of new mangles, body ironers, and other improved laundry machinery, we are now able to iron the hospital clothing without putting it through the drying-room. The machinery is of such a character that we can now do the increased amount of work with less labor than before, and better results.

During the year a temporary pathological laboratory has been organized, and with the clinical laboratory formerly in use, good scientific work can now be done. Special investigations have been carried on in the diphtheria and scarlet-fever wards, and all patients admitted with diphtheria or suspected diphtheria have been subjected to the test of the pathological laboratory, to ensure diagnosis.

During the summer months, when the tent service was in active use, many repairs were made in the wards. Wards B, C, P, K, and L were each in turn vacated, and the wards

thoroughly repaired in all parts, including rekalsomining, painting, refinishing floors, and every inch of surface carefully treated. The furniture was repainted and shellacked, and the wards put in prime order. Considerable renovating was done, not only in other wards, but in the corridors and other public places. The usual attention was given to the outside of the buildings, several of which have been repainted.

The new ambulance stable, which was begun in the middle of the year, is now practically completed, and is one of the best of the recent additions to the hospital. It is built of brick with stone trimmings, is two stories high, and is 102 feet long by 60 feet wide. The first floor is divided into two parts: an ambulance room, 52 feet long by 38 feet wide, which gives ample room for six ambulances; and immediately in the rear are stalls for ten horses, besides one box-stall. The stalls are arranged like those of the Fire Department, so that the horses may, on release of the door, step quickly to their place in the ambulance. The other half of the floor is divided into a carriage-room, duty and harness room, and also an inside and outside room for washing carriages. The second story, besides a hay-loft, grain-room, and storage-room for vehicles out of season, has eight bedrooms, sufficient for twelve men, for stable employés, and a certain number of porters and chore-men.

The stable is finished in hard-pine, and the ambulance-house, carriage-house, and stalls have a rock-cement floor. Special pains have been taken for the disposal of the manure and for the ventilation of the whole stable, that the air may be at all times as pure as possible in any building occupied for stable purposes. These accommodations supply a want which has been emphasized in previous reports, and add greatly to the executive department in its means of doing the ambulance work. The ambulance corps will shortly be re-organized, and, with a larger number of ambulances and drivers, the deficiency in the ambulance equipment, so long apparent, will be remedied.

The Convalescent Home, which has now been used for the second year, has proved to be a most excellent and salutary addition to the hospital resources.

Number of patients in Home at the beginning of the year	25
Admitted during the year	362
Total treated during the year	387
Discharged during the year	360
Died during the year	0
<hr/>	
Total	360
Number remaining in Home January 31, 1893	27
Largest number on any one day	33
Smallest number on any one day	9
Daily average number of patients	21
Average length of stay in days	21 $\frac{2}{10}$

The Home has proved of great assistance in relieving the hospital wards of patients who still required treatment, thus giving a larger number of beds for patients treated in the hospital. It has also been of great benefit to the patients themselves, in more surely and safely hastening recovery, under conditions much more pleasant and healthful than those of a hospital ward. These convalescent patients can be allowed to remain longer at the Home, and in many cases can be retained almost to the day when they resume work. Before this Home was built we were often obliged to discharge patients sooner than was advisable, in some cases sending them to the city homes, which often have poor hygienic conditions and surroundings, and which tended to produce a relapse. During the summer months this period of convalescence has been particularly grateful to the patients, practically affording them a country outing.

The management of the Home has been excellent, and the atmosphere of the place has exerted on its occupants an influence greater than mere improvement in health. They learn many things, domestic and hygienic, which have a bearing upon the life and social condition of the working class.

The hospital has had a sufficient number of patients to fill the beds, but many think that if they are able to go to

a "home" they are able to go to their own home, without apprehending the different conditions. Whenever a discharged patient has once enjoyed the Convalescent Home she is not only willing but anxious to be sent there again. The word "home," as applied to beneficiary institutions, seems to make many unwilling to avail themselves of the kind of home our hospital possesses, and which is quite different from institutions for chronic patients of the indigent class.

The work laid out upon the park and grounds last year has been justified by the greater beauty of the lawns, trees, and shrubbery, and the general improved rural appearance about the Home.

The Training School for Nurses has finished its fifteenth year. The changes in the school have been as follows:

SUMMARY FROM FEBRUARY 1, 1892, TO FEBRUARY 1, 1893.

February 1, 1892, the number of nurses was . . . 86

During the year nurses have left as follows:

Have been graduated	25
Assistant Superintendent of Nurses resigned	1
Night Superintendent of Nurses promoted	1
Graduate Head Nurses resigned	5

Pupil nurses dropped:

For want of proper health or strength	6
Advised to resign	2
Demands of kindred	1
Dismissed	1
	— 10
Probationers not accepted	11
	—
Total vacancies	53
	—
Number remaining	33
Graduates remaining as Head Nurses	5
Probationers admitted	53
Pupil nurse readmitted	1
	— 59
	—
Remaining January 31, 1893	92

Nurses connected with the school February 1, 1893 :

Assistant Superintendent of Nurses	1
Night Superintendent of Nurses	1
Graduate Head Nurses	6
Senior Nurses acting as Head Nurses	11
Assistant Nurses	67
Probation Nurses	4
Matron and Nurses at Convalescent Home	2
Total	<hr/> 92

The Training School has graduated during the year 25 nurses, and since the formation of the school, 301 nurses.

The Superintendent of Nurses and her assistants have given 230 class recitations in the manuals and text-books. Thirty-three lectures have been given to the school on Friday afternoons by members of the Medical and Surgical Staff. The course of instruction, to be found on page 168, and the distribution of studies, on page 169, have been closely followed in the various classes. The library of text-books now numbers 298, and the general library at the Nurses' Home 615 volumes.

Mrs. Dearborn, principal of the Boston Cooking School, has continued the instruction in cooking at the kitchen of the Nurses' Home. There have been twenty-two classes combined with practical work.

Heretofore, *massage* has been taught by the Superintendent of Nurses and her assistants, but the work of the school has so increased as to make a change necessary. Mrs. Bertha J. Raemisch, a graduate of this school, who devotes her entire time to teaching *massage*, was appointed instructor in *massage*, and there have been 104 class clinics. Every pupil in the school is now given four lessons in friction in classes composed of four pupils each. If nurses are found physically competent, and have the manual dexterity for *massage*, classes of ten are formed and they are given six lessons in manipulation, and later two classes in manipulation are combined and given two lessons in passive movement. This method

has proved more thorough, and being given to nurses during their first year they are available during the remainder of their training for giving massage to both private and ward patients. Additional anatomical models and manikins have been provided for the purpose of study and class recitations.

The parlor of the Nurses' Home has received additional magazines and illustrated papers. The comfort and advancement of the nurses have been promoted in many ways, tending not only to make their education more symmetrical, but to render their hospital life stimulating, healthful, and enjoyable.

The foregoing statistics show an increase of six nurses during the year. This was necessary because the daily average of patients has increased, the work has been of a more arduous character, the wards have been crowded during many months, and the epidemic of influenza for two successive years has severely tried the nursing service. Five years ago, with a daily average of 354 patients, there were 68 nurses. During the past year, with a daily average of 433 patients, the number of nurses in the hospital was 92, showing that while the daily average increased 79 patients, there was a corresponding increase of 24 nurses. Enlarging the ratio of nurses to patients has enabled us to do more work, and of a better character. It has also allowed a larger number of nurses for night duty, and also specials for some of the more laborious wards.

This increase of the nursing force has compelled providing proper accommodations for them. The Nurses' Home is limited to sixty-seven beds. After temporizing, by placing the surplus of nurses in illy adapted hospital rooms formerly occupied by them, it was decided to establish an additional Nurses' Home. This has been done by leasing a house on East Springfield street, near the present Nurses' Home. This has been altered and fitted up, giving excellent accommodations for twenty-four nurses, and is known as "The Nightingale." There should be provided a permanent building within our own boundaries, not only adequate for the present force, but for the additional nurses that must inevi-

tably be supplied when future additional wards are constructed.

In the last report we noted the formation of a Nurses' Club, its special object being the encouragement and advancement of the various interests both of the graduate nurses and pupils of the Training School. We are pleased to record that the club has been a notable success, many graduates have returned to the meetings, often outnumbering the pupils of the school. The club has regular meetings on the first Tuesday evening of each month, and the following topics have been considered or discussed:

Typhoid Fever: (a) Present method in the hospital, as to observations, nursing, and treatment. (b) Treatment of convalescents in typhoid fever.

(a) Present methods of antiseptic dressings, with demonstrations, exhibition of dressings, etc. (b) A report of eleven antiseptic cases in Ward C.

Advantages and disadvantages of private nursing, as compared with hospital nursing.

Lecture on Hypnotism, by Dr. Morton Prince.

District Nursing: Three papers by graduate nurses.

A nurse's care of herself in private nursing, from different standpoints: (a) Proper care of the nurse as to her food. (b) A nurse's care of her own health. (c) Her bank account; her dress; her recreation.

Christmas reunion of the non-resident and resident members of the club.

Address: "Is it any Advantage for a Graduate of a Training School connected with a General Hospital to obtain the Diploma of a Lying-in Hospital Training School? What is taught in such Training Schools." By Dr. William L. Richardson.

These meetings have been of great interest, and the large attendance affords ample evidence of the wisdom of forming this club. It is not the intention to devote the whole evening to formal exercises, but considerable time is allowed for social intercourse.

The nurses of the Training School, both graduates and

pupils, have, during the year, given most loyal and faithful service to the hospital and to the patients assigned to their care. By reason of the crowded condition of the wards and the serious character of the cases, the work has often been very laborious and fatiguing, and in the wards for infectious diseases was attended with risk. Grateful acknowledgments by the executive department are due to the nurses in the Training School, whose good faith and courage have been tested to the fullest extent.

Under the instruction of the Trustees, and by invitation of the Massachusetts Commission for the World's Columbian Exposition, there is now being prepared an exhibit for the Department of Charities and Philanthropy. This exhibit is well under way, and probably will prove interesting and instructive, especially to hospital workers. The exhibit will not attempt to display surgical appliances or the practice of medicine and surgery, but it will aim to show the construction, furniture, and furnishings of the hospital, and particularly to illustrate the various departments of hospital work. The construction, heating, and ventilation of the hospital will be shown by plans. Photographs will give views of the wards, rooms, and offices, and also the industrial side of the hospital. Models of furniture, furnishings, utensils, and appliances, and samples of materials for supplies used in surgical dressings, will be included, as well as implements and special appliances for the medical and surgical treatment. The work of the Training School for Nurses will be illustrated by showing its course of training, methods of ward work, and by samples of nurses' handiwork in the wards as well as the class-room. It is hoped that this exhibit will give an object-lesson in the method of running a large general hospital.

I appreciate and gratefully recognize the coöperation and loyal support given me by the various heads of departments, by the house staff, as well as by male nurses and employées generally. The principal and foremost object in conducting a general hospital should be the welfare of the patients. Nothing can secure this except the full coöperation of all engaged in the work. The year's work has been unusually

arduous, but has produced satisfactory results, and those who contributed to this end are entitled to grateful acknowledgments.

A cordial expression of my obligations is due to the members of the medical and surgical staff for their encouragement, assistance, and advice. Their lectures to the Training School have been of great value, and have had no small share in the success of the education of the nurses during the year.

In presenting this my fourteenth annual report, I desire to express in the highest degree to the Trustees my gratitude and sense of obligation for their continued support and confidence.

I have the honor to be,

Your obedient servant,

G. H. M. ROWE, M.D.,
Superintendent and Resident Physician.

MEDICAL AND SURGICAL STATISTICS.

MEDICAL DISEASES.

Classified according to the Nomenclature of Diseases, as published by the Royal College of Physicians of London and American Medical Association.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
GENERAL DISEASES.											
A.											
Chicken-pox		3	....	3	2	1	....	....	....	3	....
Measles.....		19	32	51	38	9	....	....	....	47	4
Scarlet Fever.....		1	....	1	....	....	....	1	....	1	....
Cerebro-spinal Fever.....		1	1	2	1	....	1	....	....	2	....
Typhoid Fever	9	169	102	271	154	69	1	1	40	265	15
Febricula		2	2	4	3	1	....	....	....	4	....
Intermittent Fever.....		35	8	43	10	33	....	....	....	43	....
Quotidian.....		6	3	9	3	5	....	1	....	9	....
Tertian		19	10	29	18	11	....	....	....	29	....
Irregular		5	4	9	6	3	....	....	....	9	....
Malaria.....		2	....	2	1	....	....	....	....	1	1
Choleraic Diarrhœa		4	1	5	4	1	....	....	....	5	....
Diphtheritic Paralysis .....		....	1	1	....	....	1	....	....	1	....
After Diphtheria		1	2	3	1	2	....	....	....	3	....
Whooping-cough		2	4	6	2	4	....	....	....	6	....
Mumps	1	3	3	6	4	3	....	....	....	7	....
Influenza	17	21	6	27	28	13	....	1	1	43	1
Erysipelas.....	3	45	52	97	71	20	1	....	5	97	3
Septicemia.....	2	....	6	6	1	6	....	....	1	8	....
Carried forward	32	338	237	575	347	181	4	4	47	583	24

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	32	338	237	575	347	181	4	4	47	583	24
B.											
Acute Rheumatism	18	155	85	240	71	166	2	....	1	240	18
Subacute Rheumatism.....	2	39	30	69	8	62	1	....	....	71	....
Gonorrhœal Rheumatism.....	....	15	....	15	2	10	1	....	1	14	1
Synovial Rheumatism .....	....	....	1	1	....	1	....	....	....	1	....
Muscular Rheumatism.....	....	7	....	7	....	7	....	....	....	7	....
Chronic Rheumatism	6	18	10	28	1	28	1	1	....	31	3
Chronic Rheumatic Arthritis .....	....	4	5	9	....	9	....	....	....	9	....
Acute Gout.....	....	2	....	2	....	1	....	....	....	1	1
Syphilis	1	5	3	8	1	6	....	....	2	9	....
Primary .....	....	....	1	1	....	1	....	....	....	1	....
Secondary .....	....	6	5	11	....	10	1	....	....	11	....
Hereditary.....	....	1	....	1	....	....	....	....	....	....	1
Chancroid .....	....	....	1	1	1	....	....	....	....	1	....
Cerebral.....	1	3	1	4	....	4	....	....	1	5	....
Tubercular Meningitis.....	....	4	2	6	....	....	....	....	6	6	....
Phthisis Pulmonalis	16	183	89	272	2	185	17	2	63	269	19
Hæmoptysis .....	....	5	....	5	....	5	....	....	....	5	....
Acute Miliary Tuberculosis.....	....	4	2	6	....	....	....	....	6	6	....
Tubercular Peritonitis .....	....	1	....	1	....	....	....	....	1	1	....
Rachitis .....	....	....	2	2	....	1	1	....	....	2	....
Diabetes.....	1	2	3	5	....	3	....	1	1	5	1
Purpura Hemorrhagic .....	....	1	....	1	....	1	....	....	....	1	....
" Rheumatica.....	....	1	....	1	....	1	....	....	....	1	....
Anæmia	4	....	46	46	4	42	....	....	2	48	2
DISEASES OF THE NERVOUS SYSTEM.											
Encephalitis .....	....	1	....	1	....	....	....	....	1	1	....
Meningitis.....	....	7	3	10	....	3	1	....	6	10	....
Tumor of Brain.....	....	2	2	4	....	....	3	....	1	4	....
Apoplexy.....	....	14	11	25	....	5	....	....	20	25	....
Sanguineous .....	....	2	....	2	....	....	....	....	2	2	....
<i>Carried forward</i>	81	820	539	1359	437	732	32	8	161	1370	70

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	81	820	539	1359	437	732	32	8	161	1370	70
Cerebral Concussion.....		1	....	1	....	....	....	....	1	1	....
Cerebral Anæmia		1	....	1	1	....	....	....	....	1	....
Sunstroke and effects of		17	1	18	10	6	....	....	2	18	....
Diseases of Cerebral Arteries.....		....	1	1	....	....	....	....	1	1	....
Fatty or Calcareous Degeneration...		1	....	1	....	1	....	....	....	1	....
Aneurism		1	....	1	....	....	....	....	1	1	....
Hæmorrhagic Pachymeningitis .....		....	1	1	....	....	....	....	1	1	....
DISEASES OF SPINAL CORD AND MEMBRANES.											
Spinal Meningitis.....		1	....	1	....	1	....	....	....	1	....
Myelitis .....		....	1	1	....	1	....	....	....	1	....
Cerebro-Spinal Meningitis .....		....	1	1	....	....	....	....	....	....	1
DISEASES OF THE NERVES.											
Hemiplegia	2	14	11	25	....	16	....	....	8	24	3
Paraplegia.....	1	4	1	5	....	1	1	....	3	5	1
Locomotor Ataxy.....		4	1	5	....	5	....	....	....	5	....
Peripheral Neuritis.....		2	1	3	....	....	....	....	....	....	3
Serivener's Palsy		1	....	1	....	1	....	....	....	1	....
Neuro-Asthenia	2	4	14	18	....	18	1	1	....	20	....
Neuritis	2	12	4	16	2	15	....	....	1	18	....
Alcoholic Neuritis.....	1	11	9	20	1	16	1	1	2	21	....
Brachial Neuritis.....		1	....	1	....	....	....	1	....	1	....
FUNCTIONAL DISEASES OF NERVOUS SYSTEM.											
Infantile Convulsions		1	....	1	....	....	....	....	1	1	....
Epilepsy (Single Fit).....	1	23	4	27	....	24	2	2	....	28	....
Convulsions		3	....	3	....	2	1	....	....	3	....
Chorea	1	....	2	2	1	1	....	....	1	3	....
Hysteria.....	1	4	32	36	7	21	8	1	....	37	....
Neuralgia (General).....	1	2	1	3	1	2	....	....	....	3	1
Hemierania.....		....	2	2	....	2	....	....	....	2	....
Sciatica.....		10	2	12	1	11	....	....	....	12	....
<i>Carried forward</i>	93	938	628	1566	461	876	46	14	183	1580	79

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	93	938	628	1566	461	876	46	14	183	1580	79
Pleurodynia ..		3	3	6		6				6	
Lumbago	1	8	2	10	1	9				10	1
Cephalalgia		7	5	12	4	8				12	
Intercostal Neuralgia		3	1	4	3	1				4	
Concussion, Lightning		1		1	1					1	
Hypochondriasis		3	2	5	1	1	2			4	1
Syncope			1	1				1		1	
Hystero-epilepsy			1	1		1				1	
DISEASES OF INTELLECT.											
Mania, Acute		3	2	5		2		3		5	
Melancholia		2	1	3		3				3	
Dementia		3	3	6		3	1	1	1	6	
Acute		1	1	2			2			2	
Chronic		3		3		1	2			3	
Alcoholic		3		3		3				3	
Paralysis of the Insane		8		8		3	4		1	8	
DISEASES OF THE CIRCULATORY SYSTEM.											
DISEASES OF THE HEART AND ITS MEMBRANES.											
Pericarditis	2	9	4	13	3	3	1		8	15	
Endocarditis	2	5	2	7		7	1			8	1
Valve Disease:											
Aortic		13	2	15		10	2		3	15	
Mitral	5	34	35	69		46	6		18	70	4
Aortic and Mitral	2	15	11	26		17	1		7	25	3
Tricuspid		2	2	4		3				3	1
Functional		1		1		1				1	
Embolism of Coronary Artery		1		1					1	1	
Dilatation		11	1	12		3	1		8	12	
Fatty Degeneration		1	2	3		2			1	3	
Angina Pectoris		1		1		1				1	
<i>Carried forward</i>	105	1079	709	1788	474	1010	69	19	231	1803	90

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	105	1079	709	1788	474	1010	69	19	231	1803	90
Cardiac: Variety undetermined.....	1	17	8	25	....	11	....	1	13	25	1
Exophthalmic Goitre .....	....	....	1	1	....	....	....	....	....	....	1
DISEASES OF THE ARTERIES.											
Atheroma .....	....	1	1	2	....	1	1	....	....	2	....
Aneurism .....	....	3	....	3	....	2	....	....	1	3	....
Arterio-sclerosis.....	....	1	....	1	....	1	....	....	....	1	....
DISEASES OF THE VEINS.											
Phlebitis .....	....	1	2	3	....	3	....	....	....	3	....
Phlegmasia Dolens	1	....	....	....	....	1	....	....	....	1	....
DISEASES OF RESPIRATORY SYSTEM.											
Croup .....	....	1	....	1	1	....	....	....	....	1	....
DISEASE OF NOSTRILS.											
Nasal Catarrh .....	....	....	1	1	....	1	....	....	....	1	....
DISEASES OF LARYNX.											
Laryngeal Catarrh.....	....	1	....	1	1	....	....	....	....	1	....
Laryngitis	2	1	1	2	1	3	....	....	....	4	....
Acute .....	....	1	....	1	....	1	....	....	....	1	....
DISEASES OF TRACHEA AND BRONCHI.											
Bronchial Catarrh .....	....	1	2	3	....	3	....	....	....	3	....
Bronchitis	4	12	14	26	5	22	....	....	....	27	3
Acute	2	8	11	19	11	7	1	....	....	19	2
Chronic	2	17	16	33	....	26	....	....	7	33	2
Capillary .....	....	3	1	4	....	1	....	....	3	4	....
Asthma .....	....	6	6	12	....	12	....	....	....	12	....
DISEASES OF THE LUNG.											
Pneumonia	30	211	76	287	129	48	5	....	108	290	27
Broncho-Pneumonia .....	....	....	1	1	....	1	....	....	....	1	....
Pulmonary Apoplexy.....	....	1	....	1	....	1	....	....	....	1	....
Oedema.....	....	6	1	7	....	....	....	....	7	7	....
Acute Pneumonic Phthisis.....	....	....	1	1	....	....	....	....	1	1	....
<i>Carried forward</i> ...	147	1371	852	2223	622	1155	76	20	371	2244	126

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	147	1371	852	2223	622	1155	76	20	371	2244	126
DISEASES OF THE PLEURA.											
Pleurisy	7	38	25	63	12	47	1	....	6	66	4
Chronic Pleurisy .....	....	....	1	1	....	....	....	....	....	....	1
Empyema	2	5	1	6	....	4	3	....	1	8	....
Pleurisy; Effusion.....	....	4	1	5	1	3	....	....	1	5	....
Pneumothorax.....	....	2	1	3	....	1	....	....	1	2	1
Pyo pneumo-thorax .....	....	1	1	2	....	....	....	....	2	2	....
DISEASES OF THE DIGESTIVE SYSTEM.											
Stomatitis .....	....	2	1	3	1	1	....	....	....	2	1
Ulcerated Stomatitis.....	....	1	....	1	....	1	....	....	....	1	....
DISEASES OF THE FAUCES AND TONSIL.											
Abscess .....	....	1	....	1	1	....	....	....	....	1	....
Quinsy .....	....	5	6	11	6	5	....	....	....	11	....
Tonsillitis	2	21	31	52	37	14	....	....	1	52	2
Peritonsilar Abscess .....	....	1	....	1	....	....	....	....	....	....	1
DISEASES OF THE PHARYNX.											
Pharyngitis .....	....	1	1	2	1	1	....	....	....	2	....
Cancer .....	....	1	....	1	....	....	1	....	....	1	....
DISEASES OF THE STOMACH.											
Gastritis.	3	19	25	44	15	29	....	....	....	44	3
Chronic Ulcer	3	4	6	10	2	8	....	....	....	10	3
Dyspepsia .....	....	2	3	5	....	5	....	....	....	5	....
Gastrodynia .....	....	1	....	1	....	1	....	....	....	1	....
Dilatation	1	5	....	5	....	3	2	....	....	5	1
Gastro-duodenitis	1	6	9	15	4	12	....	....	....	16	....
Gastric Catarrh.....	....	3	9	12	7	4	1	....	....	12	....
Cancer	1	6	7	13	....	4	2	....	8	14	....
DISEASES OF THE INTESTINES.											
Typhlitis.....	....	5	5	10	2	3	2	1	2	10	....
Dysentery .....	....	3	3	6	3	3	....	....	....	6	....
<i>Carried forward</i>	167	1508	988	2496	714	1304	88	21	393	2520	143

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	167	1508	988	2496	714	1304	88	21	393	2520	143
Gastro-enteritis.....		1	....	1	1	....	....	....	....	1	....
Diarrhœa.....	1	9	4	13	7	6	....	....	1	14	....
Colic.....		5	2	7	4	2	....	1	....	7	....
Constipation.....	2	12	15	27	13	15	....	....	....	28	1
Enteritis.....		18	3	21	10	9	....	....	2	21	....
DISEASES OF THE LIVER.											
Hepatitis.....	1	1	....	1	1	1	....	....	....	2	....
Peri-hepatitis.....			1	1	....	....	....	....	....	....	1
Cirrhosis.....	1	6	6	12	....	4	2	....	7	13	....
Jaundice.....			2	2	1	....	....	....	1	2	....
Carcinoma.....		2	5	7	....	4	1	....	2	7	....
DISEASES OF THE PERITONEUM.											
Peritonitis.....		5	2	7	2	1	1	....	2	6	1
Ascites.....	1	2	1	3	....	3	....	....	1	4	....
Tubercular Peritonitis.....			1	1	....	....	1	....	....	1	....
DISEASES OF URINARY SYSTEM.											
DISEASE OF KIDNEY.											
Bright's Kidney.....			1	1	....	1	....	....	....	1	....
Acute.....		12	9	21	2	11	....	....	5	18	3
Chronic.....	5	71	24	95	1	58	4	....	30	93	7
Granular.....		1	2	3	....	1	1	....	1	3	....
Fatty.....		1	....	1	....	....	....	....	1	1	....
Uræmia.....	1	....	1	1	....	2	....	....	....	2	....
Pyelitis.....		1	1	2	....	1	....	1	....	2	....
Pyelo Nephritis.....		1	....	1	....	1	....	....	....	1	....
Movable Kidney.....			2	2	....	1	....	....	....	1	1
Renal Calculus.....		1	1	2	....	1	....	....	....	1	1
DISEASES OF THE BLADDER.											
Cystitis.....		1	....	1	....	1	....	....	....	1	....
Acute.....			1	1	1	....	....	....	....	1	....
Chronic.....			2	2	....	1	1	....	....	2	....
<i>Carried forward</i>	179	1658	1074	2732	757	1428	99	23	446	2753	158

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	179	1658	1074	2732	757	1428	99	23	446	2753	158
Fissure of Urethra.....			1	1		1				1	
Urethral Caruncle.....			3	3	2	1				3	
Incontinence of Urine.....	1				1					1	
Acute Prostatitis.....		1		1	1					1	
DISEASES OF WOMEN (OF THE OVARY.)											
Ovarian Neuralgia.....			1	1		1				1	
Fibrous Tumor.....			1	1		1				1	
Complex Cystic Tumor.....			1	1		1				1	
DISEASES OF BROAD LIGAMENT.											
Pelvic Peritonitis.....	1		13	13	2	11			1	14	
Pelvic Cellulitis			26	26		24	1			25	1
Salpingitis.....			6	6	1	5				6	
Abscess.....			6	6	1	5				6	
DISEASES OF THE WOMB.											
Catarrh (Leucorrhœa).....			13	13	1	10	1	1		13	
Hyperplasia.....			4	4		3		1		4	
Endometritis.....			5	5	1	3		1		5	
Inflammation.....			3	3	1	2				3	
Ulcer.....			1	1		1				1	
Carcinoma.....	1		12	12		11			2	13	
Lacerated Cervix.....	7		34	34	15	25	1			41	
Lacerated Cervix and Perineum.....			9	9	3	6				9	
Fibrous Tumors.....	1		1	1		1		1		2	
Polypus			2	2		2				2	
Displacements:											
Anteversion			2	2	1	1				2	
Retroversion.....	1		21	21	7	14	1			22	
Anteflexion.....			3	3		3				3	
Prolapsus			4	4	1	3				4	
Procidentia.....			1	1		1				1	
Retrocession.....			1	1		1				1	
<i>Carried forward</i>	191	1659	1248	2907	795	1565	103	27	449	2939	159

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	191	1659	1248	2907	795	1565	103	27	449	2939	159
Foreign Body.....			1	1	1					1	
Inflammation of Vagina			5	5	2	3				5	
Inflammation of Labia			5	5	1	4				5	
FUNCTIONAL DISEASES OF WOMEN.											
Dysmenorrhœa	1		3	3	2	1		1		4	
Metrorrhagia	3		16	16	7	11	1			19	
Pregnancy.....			3	3		3				3	
Puerperal.....			1	1				1		1	
DISEASES OF PREGNANCY.											
Metritis.....			1	1		1				1	
Vomiting.....	2		3	3	3	1			1	5	
Abortion	3		19	19	14	7	1			22	
Premature Labor.....			8	8	6	2				8	
Labor at Term.....	2		5	5	5	1	1			7	
After Labor at Term.....			3	3	3					3	
After Miscarriage.....			15	15	4	10		1		15	
DISEASES OF CELLULAR TISSUE.											
Cellulitis.....		1	2	3		1	2			3	
DISEASES OF CUTANEOUS SYSTEM.											
Erythema.....			2	2		2				2	
Dermatitis.....		1	2	3	1	2				3	
Urticaria		1		1	1					1	
Eczema.....			3	3	1	2				3	
Pityriasis.....		1		1	1					1	
Psoriasis.....		2	1	3		1	1			2	1
Herpes			1	1	1					1	
Vaccinia.....		1		1	1					1	
Impetigo		1		1		1				1	
Dermatitis Calorica.....			1	1		1				1	
POISONS.											
METALS AND THEIR SALTS.											
Arsenic....		3	2	5	1	1	1		2	5	
<i>Carried forward</i>	202	1670	1350	3020	850	1620	110	30	452	3062	160

MEDICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	202	1670	1350	3020	850	1620	110	30	452	3062	160
Mercury.....		2		2	1				1	2	
Lead.....		7	1	8		6	2			8	
Colic.....		7		7	1	6				7	
Palsy.....		2	1	3		2	1			3	
Chronic.....		2		2		2				2	
Bromism.....			1	1		1				1	
ACIDS.											
Oxalic Acid.....			1	1					1	1	
Salicylic Acid.....		1		1	1					1	
Bed-bug Poison		1		1	1					1	
VEGETABLE POISONS.											
Opium.....		7	4	11	5	4			2	11	
Opium Habit.....			2	2		1			1	2	
Abuse of Alcohol (Alcoholismus)....	5	112	35	147	67	60	1	3	16	147	5
Aconite.....		1		1					1	1	
Ergot and Creosote.....			1	1	1					1	
GASEOUS POISONS.											
Coal Gas.....		4	1	5	3				2	5	
Illuminating Gas.....		1		1	1					1	
UNCLASSIFIED.											
Debility	5	51	114	165	36	120	6	1	2	165	5
Diagnosis undetermined	2	13	12	25	1	5	2	2	15	25	2
Infancy.....	3		6	6	8	1				9	
Inanition		3	3	6	2	1			3	6	
Ophthalmia.....		1	1	2		2				2	
Surgical		13	4	17	3	11	3			17	
Epistaxis		1		1	1					1	
Mammary Cancer.....			1	1				1		1	
Gonorrhœa		1	2	3		3				3	
Recto-Vaginal Fistula			1	1				1		1	
Laceration of Perineum.....			6	6	1	3		2		6	
<i>Carried forward</i>	217	1900	1547	3447	983	1848	125	40	496	3492	172

MEDICAL DISEASES. — *Concluded.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	217	1900	1547	3447	983	1848	125	40	496	3492	172
Exposure.....	1	....	1	1	....	....	....	....	1	....
Intestinal Hæmorrhage	2	....	2	....	2	....	....	....	2	....
Laceration Perineum and Cervix.....	6	6	2	3	1	....	....	6	....
Periostitis	1	....	1	1	....	1	1	....	....	2	....
Transferred for Surgical Treatment...	43	19	62	....	24	26	12	....	62	....
Malingering	3	....	3	1	2	....	....	....	3	....
No Disease	14	8	22	18	2	....	2	....	22	....
Transferred, Contagious.....	4	4	8	....	2	5	1	....	8	....
Stricture, Urethra.....	1	....	1	....	1	....	....	....	1	....
Cellulitis, Leg	1	....	1	....	1	....	....	....	1	....
Frost Bite	1	....	1	1	....	....	....	....	1	....
Immersion.....	1	....	1	1	....	....	....	....	1	....
Tubercular Elbow	1	....	1	....	1	....	....	....	1	....
Transferred Aural and Ophthalmic Services	3	3	....	2	1	....	....	3	....
Transferred to Gynæcological Service.	10	10	....	2	7	1	....	10	....
Amyloid.....	1	....	1	....	....	....	....	1	1	....
Taliper Valgus	1	....	1	....	1	....	....	....	1	....
Grand Total	218	1974	1598	3572	1007	1892	166	56	497	3618	172

CONTAGIOUS SERVICE.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						In Hospital Jan. 31, 1893.
		Male.	Female.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
Diphtheria	4	166	217	383	184	7	....	....	185	376	11
Scarlet Fever	27	123	122	245	210	6	1	....	19	236	36
Diphtheria and Scarlet Fever	5	39	50	89	39	4	....	....	39	82	12
Measles .....	....	4	....	4	2	1	1	....	....	4	....
Tonsillitis .....	....	10	20	30	28	1	....	....	....	29	1
Laryngitis .....	....	3	2	5	5	....	....	....	....	5	....
Diphtheria and Measles .....	....	....	1	1	1	....	....	....	....	1	....
Chicken-pox .....	....	2	1	3	....	....	1	....	2	3	....
Diphtheria and Chicken-pox .....	....	1	....	1	....	....	....	....	1	1	....
Scarlet Fever and Chicken-pox .....	....	....	1	1	1	....	....	....	....	1	....
Nephritis after Scarlet Fever	1	1	1	2	2	1	....	....	....	3	....
Pneumonia after Scarlet Fever .....	....	....	1	1	....	1	....	....	....	1	....
Broncho-pneumonia .....	....	1	....	1	....	1	....	....	....	1	....
Peritonsillar Abscess .....	....	1	....	1	....	....	....	....	....	....	1
Abscess of Tonsil .....	....	....	1	1	1	....	....	....	....	1	....
Cardiac Disease .....	....	1	....	1	....	....	....	1	....	1	....
Typhoid Fever .....	....	1	....	1	....	1	....	....	....	1	....
Syphilis .....	....	1	....	1	....	1	....	....	....	1	....
Doubtful .....	....	4	3	7	6	....	....	1	....	7	....
No Disease .....	....	3	7	10	8	....	....	2	....	10	....
Total	37	361	427	788	487	24	3	4	246	764	61
OPERATIONS.											
Intubation	2	29	34	63	8	1	....	....	a56	65	....
Intubation and Trachæotomy .....	....	13	5	18	....	....	....	....	b18	18	....
Trachæotomy, primary .....	....	25	23	48	5	....	....	....	c43	48	....
Total	2	67	62	129	13	1	....	....	117	131	....

a Of these, 27 died of extension; 19 of sepsis; 9 of pneumonia; 1 of shock.

b Of these, 8 died of extension; 5 of sepsis; 3 of pneumonia; 1 of shock; 1 of heart failure.

c Of these, 20 died of extension; 12 of sepsis; 3 of pneumonia; 4 of shock; 4 of exhaustion.

SURGICAL DISEASES.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
GENERAL DISEASES.											
Erysipelas :											
Simple.....	4	18	2	20	5	11	.....	.....	3	19	5
Phlegmonous	3	4	1	5	.....	7	.....	.....	1	8	.....
Diphtheria.....	.....	1	1	2	.....	.....	1	.....	1	2	.....
Anthrax .....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Rheumatism :											
Acute .....	.....	.....	1	1	1	.....	.....	.....	.....	1	.....
Sub-acute.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Gonorrhœal .....	.....	2	.....	2	.....	2	.....	.....	.....	2	.....
Chronic .....	.....	1	1	2	.....	.....	2	.....	.....	2	.....
Gangrene.....	.....	3	1	4	.....	1	.....	.....	3	4	.....
Senile	2	2	1	3	1	2	.....	.....	2	5	.....
General Tuberculosis.....	.....	1	.....	1	.....	.....	.....	.....	1	1	.....
Syphilis :											
Primary	1	1	.....	1	.....	2	.....	.....	.....	2	.....
Tertiary .....	.....	4	6	10	.....	10	.....	.....	.....	10	.....
Pyæmia .....	.....	3	1	4	.....	2	.....	.....	2	4	.....
Varicello	1	.....	.....	.....	.....	1	.....	.....	.....	1	.....
Tetanus .....	.....	2	.....	2	.....	.....	.....	.....	2	2	.....
Electric Shock.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Alcoholism .....	.....	9	1	10	3	5	.....	.....	2	10	.....
MALIGNANT TUMORS. [See also Special Regions.]											
Cancer .....	.....	13	1	14	.....	11	.....	.....	1	12	2
Scirrhus .....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Epithelial .....	.....	15	2	17	.....	15	.....	2	.....	17	.....
Epidermoid.....	.....	4	.....	4	.....	4	.....	.....	.....	4	.....
Carried forward.....	11	86	20	106	10	77	3	2	18	110	7

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	11	86	20	106	10	77	3	2	18	110	7
Lympho-sarcoma	4	4	....	2	....	....	....	2	2
Sarcoma	4	5	9	....	7	2	....	....	9	....
Recurrent	1	....	1	....	1	....	....	....	1	....
NON-MALIGNANT TUMORS. [See also Special Regions.]											
Fibrous Tumor	1	2	3	....	3	....	....	....	3	....
Papillary Fibroma	1	....	1	....	1	....	....	....	1	....
Hæmatoma	1	3	1	4	2	3	....	....	....	5	....
Myxoma.....	1	....	1	....	1	....	....	....	1	....
Lipoma.....	3	5	8	2	6	....	....	....	8	....
Adenoma.....	1	....	1	....	1	....	....	....	1	....
Lymphoma	1	1	2	....	2	....	....	....	2	....
Angeioma	1	....	....	....	....	1	....	....	....	1	....
Compound Cysts:											
Sebaceous	2	....	2	....	2	....	....	....	2	....
Dermoid Cyst	1	....	1	....	1	....	....	....	1	....
Axillary Tumor	1	....	1	....	....	1	....	....	1	....
LOCAL DISEASES. Digestive System.											
Ulcerative Stomatitis	1	1	....	1	....	....	....	1	....
Ankylosis of Jaws.....	1	1	....	1	....	....	....	1	....
Cyst, Antrum.....	1	....	1	....	1	....	....	....	1	....
Alveolar Abscess.....	2	6	8	....	6	....	1	....	7	1
Glossitis	1	....	1	....	1	....	....	....	1	....
Abscess, Tongue	1	1	....	1	....	....	....	1	....
Cancer, Tongue	2	....	2	....	2	....	....	....	2	....
Tuberculosis, Mouth.....	1	1	....	....	1	....	....	1	....
Follicular Tonsillitis.....	1	1	....	1	....	....	....	1	....
Suppurative “	1	5	6	11	2	10	....	....	....	12	....
Enlarged Tonsils.....	1	1	2	....	2	....	....	....	2	....
Abscess of the Pharynx.....	1	....	1	....	1	....	....	....	1	....
Stricture of the Oesophagus	2	1	3	....	1	1	....	1	3	....
<i>Carried forward</i>	14	121	57	178	16	136	8	3	19	182	10

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	14	121	57	178	16	136	8	3	19	182	10
Gastritis			1	1	1					1	
Gastro-enteritis.....		1		1		1				1	
Ascites			1	1		1				1	
Chronic Ulcer of the Stomach.....			1	1		1				1	
Cancer “ “		1		1			1			1	
Gastralgia		1		1	1					1	
Obstipation.....		1	1	2					2	2	
Intussusception.....			1	1					1	1	
Appendicitis.....	1	25	13	38		33			5	38	1
Fecal Fistula		1		1		1				1	
Fecal			1	1					1	1	
Obstruction of the Intestines.....		1	2	3		1			2	3	
From Stricture.....		1		1					1	1	
Traumatic Rupture of Intestines.....		1		1					1	1	
Cancer of Intestines		1	2	3		1			1	2	1
“ Omentum	1		1	1				1	1	2	
Abdominal Tumor		1		1		1				1	
Hernia :											
Umbilical :											
Strangulated.....			1	1					1	1	
Inguinal		1		1		1				1	
Reducible		12		12		10		1		11	1
Irreducible		4		4		2	1	1		4	
Incarcerated		1		1		1				1	
Strangulated.....	1	11	5	16	2	12			3	17	
Femoral :											
Irreducible	1	1		1		1	1			2	
Incarcerated		1	1	2		2				2	
Strangulated.....			2	2		1			1	2	
Abdominal Tumor.....		1		1		1				1	
Ischio-Rectal Abscess.....	4	24	7	31	1	33	1			35	
Proctitis		1		1	1					1	
<i>Carried forward</i>	22	213	97	310	22	240	12	6	39	319	13

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	22	213	97	310	22	240	12	6	39	319	13
Ulceration of the Rectum.....	1	.....	.....	.....	.....	1	.....	.....	.....	1	.....
Stricture of the Rectum.....	.....	1	1	2	.....	2	.....	.....	.....	2	.....
Cancer of the Rectum.....	1	5	5	10	.....	5	2	1	.....	11	.....
Prolapse Rectum.....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Cancer Anus .....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Ulceration of the Anus.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Fistula in Ano	3	29	4	33	2	31	.....	1	.....	34	2
Hemorrhoids:											
Internal	1	22	8	30	5	24	1	1	.....	31	.....
External.....	.....	5	7	12	.....	11	.....	1	.....	12	.....
Fissure of the Anus.....	.....	7	5	12	1	11	.....	.....	.....	12	.....
Prolapsus Ani.....	1	1	.....	1	.....	2	.....	.....	.....	2	.....
Imperforate Rectum.....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Peritonitis.....	.....	2	1	3	.....	.....	.....	.....	3	3	.....
Localized.....	.....	2	1	3	.....	1	1	.....	1	3	.....
General.....	.....	3	.....	3	.....	.....	.....	.....	3	3	.....
Acute.....	1	1	1	2	.....	3	.....	.....	.....	3	.....
Traumatic .....	.....	1	.....	1	.....	.....	.....	.....	1	1	.....
Tubercular .....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
From perforation.....	.....	1	.....	1	.....	.....	.....	.....	1	1	.....
ABSORBENT SYSTEM.											
Inflammation of the Lymphatics.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Adenitis.....	.....	3	2	5	.....	4	.....	.....	.....	4	1
Syphilitic Bubo .....	.....	2	1	3	.....	3	.....	.....	.....	3	.....
Chancroidal Bubo.....	.....	2	.....	2	.....	2	.....	.....	.....	2	.....
Gonorrheal Bubo.....	2	40	1	41	2	37	.....	1	.....	40	3
Scrofulous Glands.....	.....	16	12	28	.....	25	.....	1	.....	26	2
Cervical.....	.....	3	4	7	1	5	.....	.....	1	7	.....
Axillary.....	.....	2	1	3	.....	3	.....	.....	.....	3	.....
Orchitis from Mumps.....	.....	1	.....	1	.....	.....	.....	1	.....	1	.....
CIRCULATORY SYSTEM.											
Femoral Aneurism.....	.....	1	.....	1	.....	.....	.....	1	.....	1	.....
<i>Carried forward</i>	32	366	154	520	33	416	16	14	52	531	21

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	32	366	154	520	33	416	16	14	52	531	21
Traumatic Aneurism		1	...	1	...	1	...	...	...	1	...
Carotid "		1	...	1	...	1	...	...	...	1	...
Popliteal "		1	...	1	...	1	...	...	...	1	...
Phlebitis.....	3	5	11	16	2	17	...	...	...	19	...
Secondary Hemorrhage.....		1	...	1	...	1	...	...	...	1	...
Obstruction of the Veins:											
Phlebolites		1	1	2	1	1	...	...	...	2	...
Ruptured Varix .....		...	3	3	...	3	...	...	...	3	...
RESPIRATORY SYSTEM.											
Laryngitis.....		2	1	3	...	3	...	...	...	3	...
Syphilitic Laryngitis.....		...	1	1	...	1	...	...	...	1	...
Œdema of the Glottis.....		2	...	2	...	2	...	...	...	2	...
After Tracheotomy.....		...	1	1	...	...	...	...	...	...	1
Stricture of the Larynx.....		1	...	1	...	1	...	...	...	1	...
Tuberculosis		1	...	1	...	...	...	...	1	1	...
Laryngismus Stridulus.....		1	...	1	...	1	...	...	...	1	...
Ulcerative Epiglottis.....		...	1	1	...	1	...	...	...	1	...
Pleurisy		1	...	1	...	1	...	...	...	1	...
Pneumonia.....		2	1	3	...	1	...	...	2	3	...
Empyema.....	2	16	7	23	...	16	...	1	4	21	4
Pneumothorax-pyo		1	...	1	...	...	1	...	...	1	...
SECRETORY SYSTEM.											
Abscess of the Submaxillary Gland...		...	1	1	...	1	...	...	...	1	...
Abscess of the Liver.....		1	1	2	...	...	...	...	1	1	1
Cancer " "		1	...	1	...	1	...	...	...	1	...
Biliary Calculi.....		...	3	3	...	2	...	1	...	3	...
URINARY SYSTEM.											
Pyuria.....	1	1	...	1	...	2	...	...	...	2	...
Pyelitis.....		1	...	1	...	...	...	...	1	1	...
Pyonephrosis.....		...	1	1	...	1	...	...	...	1	...
Calculus of the Kidney	1	1	...	1	...	2	...	...	...	2	...
<i>Carried forward</i>	39	408	187	595	36	477	17	16	61	607	27

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital, Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital, Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	39	408	187	595	36	477	17	16	61	607	27
Nephritic Colic.....		1	....	1	....	1	....	....	....	1	....
Floating Kidney.....		....	3	3	....	1	1	....	....	2	1
Renal Hæmaturia.....		5	1	6	....	3	....	....	2	5	1
Suppression of Urine.....		4	....	4	....	4	....	....	....	4	....
Tuberculosis of Bladder		1	....	1	....	....	....	....	1	1	....
Cystitis.....		10	4	14	1	10	1	....	....	12	2
Villous Tumor of the Bladder		2	....	2	....	2	....	....	....	2	....
Stone in the Bladder :											
Uric Acid		7	....	7	1	3	....	....	2	6	1
Retention of Urine.....	2	15	....	15	....	12	1	....	2	15	2
Prostatitis :											
Chronic		1	....	1	....	1	....	....	....	1	....
Hypertrophy of the Prostate Gland...	2	10	....	10	....	9	1	....	2	12	....
GONORRHOEA AND ITS COMPLICATIONS.											
Gonorrhœa		2	....	2	....	1	....	....	....	1	1
Phimosis		3	....	3	....	2	....	....	....	2	1
Paraphimosis.....		3	....	3	....	3	....	....	....	3	....
Epididymitis		9	....	9	....	9	....	....	....	9	....
Abscess of the Testicle		1	....	1	....	1	....	....	....	1	....
Gonorrhœal Rheumatism		2	....	2	....	1	....	....	....	1	1
“ Synovitis		1	....	1	....	1	....	....	....	1	....
Gleet		1	....	1	....	1	....	....	....	1	....
MALE URETHRA.											
Stricture of the Urethra :											
Organic	2	63	....	63	3	53	....	3	....	59	6
Traumatic		1	....	1	....	1	....	....	....	1	....
Rupture of the Urethra.....		3	....	3	....	3	....	....	....	3	....
Urethral Fever		1	....	1	....	....	....	....	1	1	....
Urinary Abscess.....		1	....	1	....	1	....	....	....	1	....
Urinary Fistula.....		6	....	6	....	3	....	....	3	6	....
Peri-urethral Abscess.....	1	9	....	9	....	10	....	....	....	10	....
<i>Carried forward</i>	46	570	195	765	41	613	21	19	74	768	43

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	46	570	195	765	41	613	21	19	74	768	43
Stone in Urethra.....		1		1		1				1	
Adherent Prepuce.....		1		1		1				1	
Malformation of the Urethra.....		1		1		1				1	
SKIN.											
Erythema			1	1		1				1	
Eczema.....		3	2	5		5				5	
Dermatitis....		1	1	2		2				2	
Frostbite	3	3		3	2	4				6	
Ulcer	4	45	48	93	8	74	1	1	2	86	11
Carbuncle	1		3	3		4				4	
Gangrene.....			1	1					1	1	
Elephantiasis			2	2		2				2	
Nævus			1	1		1				1	
Sebaceous Tumor.....			1	1		1				1	
Lupus.....		1		1		1				1	
Ingrown Nail.....			7	7		6				6	1
Pilonidal Sinus		2		2		2				2	
CELLULAR TISSUE.											
Inflammation of the Cellular Tissue ..	6	56	23	79	6	68	1	1	2	78	7
Diffuse Inflammation of the Cellular Tissue.....	1	55	12	67	3	48	1	1	9	62	6
Abscess of the Cellular Tissue.....	1	70	21	91	3	70			12	85	7
Abscess of Prevesical Space		1		1							1
BLOOD, AND OF THE BLOOD-MAKING GLANDS.											
Purpura		1		1	1					1	
Hæmophilia		1		1		1				1	
DUCTLESS GLANDS.											
Goitre			1	1					1	1	
GENERATIVE ORGANS.											
Abscess of the Penis.....		1		1		1				1	
Gangrene of the Penis .	1	1		1		1	1			2	
<i>Carried forward</i>	63	814	319	1133	64	908	25	22	101	1120	76

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	63	814	319	1133	64	908	25	22	101	1120	76
Warts of the Penis.....		1	...	1	...	1	...	...	...	1	...
Chancroid.....		2	...	2	...	2	...	...	...	2	...
Ulcer Penis.....		2	...	2	...	2	...	...	...	2	...
Cancer Penis.....		1	...	1	...	...	...	...	1	1	...
Condylomata.....		1	1	2	...	2	...	...	...	2	...
Traumatic Rupture Urethra, c Abscess of Scrotum.....		1	...	1	...	...	...	...	...	...	1
Phimosis.....		13	...	13	4	9	...	...	...	13	...
Peri-urethral Abscess.....		1	...	1	...	...	...	...	...	...	1
Œdema of the Scrotum.....		1	...	1	...	1	...	...	...	1	...
Gangrene of Scrotum and Penis.....		1	...	1	...	1	...	...	...	1	...
Hydrocele:											
Congenital.....		1	...	1	...	1	...	...	...	1	...
Acquired.....	1	9	...	9	...	9	...	...	...	9	1
Hæmatocele.....		1	...	1	...	1	...	...	...	1	...
Varicocele.....	1	5	...	5	1	2	1	...	...	4	2
Orchitis.....	1	7	...	7	...	8	...	...	...	8	...
Epididymitis.....		1	...	1	1	...	...	...	...	1	...
Abscess of the Testicle.....		2	...	2	...	2	...	...	...	2	...
Syphilitic Disease of the Testicle.....		1	...	1	...	1	...	...	...	1	...
Tuberculous Disease of the Testicle..	2	4	...	4	...	4	2	...	...	6	...
Fibrous Tumor of the Ovary.....		...	1	1	...	1	...	...	...	1	...
Cystic Tumor of the Ovary.....	2	...	10	10	2	7	...	1	1	11	1
Papillary Cystoma.....	1	...	1	1	...	1	...	...	1	2	...
Tubercle of the Fallopian Tube.....		...	1	1	...	1	...	...	...	1	...
Pelvic Abscess.....		...	1	1	...	...	...	...	1	1	...
Salpingitis.....		...	1	1	...	...	...	...	...	...	1
Endometritis Diphtheritic.....		...	1	1	...	...	...	...	1	1	...
Lac. of the Cervix.....		...	2	2	...	2	...	...	...	2	...
Cancer of the Cervix.....		...	1	1	...	...	...	1	...	1	...
Cancer of the Womb.....		...	1	1	...	...	...	...	1	1	...
Procidencia.....		...	2	2	...	2	...	...	...	2	...
<i>Carried forward</i>	71	869	342	1211	72	968	28	24	107	1199	83

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	71	869	342	1211	72	968	28	24	107	1199	83
Non-malignant Tumors of the Womb:											
Fibroid Tumor	1	....	10	10	....	6	1	2	1	10	1
Vaginitis .....	....	....	2	2	....	2	....	....	....	2	....
Abscess of the Vagina.....	....	....	2	2	....	2	....	....	....	2	....
Recto-vaginal Fistula.....	....	....	1	1	....	....	....	1	....	1	....
Abscess of the Labium.....	....	....	3	3	....	3	....	....	....	3	....
Hæmatoma of Labium .....	....	....	1	1	....	1	....	....	....	1	....
Vascular Tumor of the Meatus Urina- rius.....	....	....	2	2	....	2	....	....	....	2	....
Pelvic Abscess.....	....	....	1	1	....	....	....	....	1	1	....
FEMALE BREAST.											
Inflammation:											
Chronic .....	....	....	1	1	....	1	....	....	....	1	....
Abscess of the Breast .....	....	....	4	4	....	2	....	1	....	3	1
Cancer of the Breast.....	1	....	22	22	1	16	4	1	1	23	....
Non-malignant Tumors of the Breast..	....	....	2	2	....	2	....	....	....	2	....
Fibro-Cystic Tumor.....	....	....	1	1	....	1	....	....	....	1	....
Papillary Fibroma.....	1	....	3	3	....	4	....	....	....	4	....
NERVOUS SYSTEM.											
Meningitis .....	....	1	....	1	....	....	....	....	1	1	....
Tuberculous.....	....	....	1	1	....	....	....	....	1	1	....
Cerebral Tumor. ....	....	3	1	4	....	2	1	1	....	4	....
Apoplexy .....	....	1	1	2	....	....	....	....	2	2	....
Cyst of Dura— old.....	....	1	....	1	....	1	....	....	....	1	....
Fibrous Tumor .....	....	1	....	1	....	....	....	....	1	1	....
General Paralysis.....	....	1	....	1	....	1	....	....	....	1	....
Hemiplegia .....	....	1	1	2	....	2	....	....	....	2	....
Spastic Paralysis.....	....	1	....	1	....	1	....	....	....	1	....
SPINAL CORD AND ITS MEMBRANES.											
Lateral Sclerosis.....	....	....	1	1	....	1	....	....	....	1	....
Paraplegia .....	....	1	....	1	....	1	....	....	....	1	....
<i>Carried forward</i>	74	880	402	1282	73	1019	34	30	115	1271	85

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	74	880	402	1282	73	1019	34	30	115	1271	85
NERVES.											
Neuritis.....		1	....	1	....	....	1	....	....	1	....
FUNCTIONAL DISEASES OF THE NERVOUS SYSTEM.											
Epilepsy.....		....	1	1	....	....	1	....	....	1	....
Hysteria.....		2	4	6	....	4	1	....	....	5	1
Athetosis	1	1	....	1	....	2	....	....	....	2	....
Neuralgia:											
Facial		3	1	4	....	3	....	1	....	4	....
Sciatica.....		1	..	1	....	1	....	....	....	1	....
Coccydynia.....		....	2	2	....	2	....	....	....	2	....
Irritable Cicatrix.....		2	....	2	....	2	....	....	....	2	....
Neurasthenia		1	....	1	....	1	....	....	....	1	....
Convulsions.....		1	....	1	1	....	....	....	....	1	....
EYE.											
Abscess of the Lachrymal Sac.....		1	....	1	....	1	....	....	....	1	....
Angronia.....		....	1	1	....	1	....	....	....	1	....
EAR.											
Perforation of the Membrana Tympani,		1	....	1	....	1	....	....	....	1	....
NOSE.											
Epistaxis		5	1	6	1	5	....	....	....	6	....
BONES.											
Periostitis		3	3	6	....	6	....	....	....	6	....
Diffuse Periostitis		1	....	1	....	1	....	....	....	1	....
Osteo-Sarcoma .....		....	1	1	....	1	....	....	....	1	....
Osteomyelitis.....		1	....	1	....	....	....	....	1	1	....
Dactylitis		1	....	1	....	1	....	....	....	1	....
Necrosis.....	4	43	11	54	....	51	....	2	....	53	5
Tuberculosis Pubis .....		....	1	1	....	1	....	....	....	1	....
Rickets		1	....	1	....	1	....	....	....	1	....
<i>Carried forward</i>	79	949	428	1377	75	1104	37	33	116	1365	91

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved	Not Treated.	Died.	Total.	
<i>Brought forward</i>	79	949	428	1377	75	1104	37	33	116	1365	91
JOINTS.											
Synovitis	3	39	7	46	1	45	1	....	1	48	1
Chronic .....	....	1	....	1	....	1	....	....	....	1	....
Arthritis	1	11	8	19	1	17	2	....	....	20	....
Chronic Tuberculous Arthritis	3	12	14	26	....	23	2	....	1	26	3
Abscess of Joint.....	....	2	....	2	....	....	....	....	1	1	1
Periarthritis	1	....	....	....	....	1	....	....	....	1	....
Hip Disease	5	6	4	10	....	12	....	....	2	14	1
Ankylosis .....	....	4	2	6	....	5	....	....	....	5	1
Bow-leg .....	....	....	1	1	....	1	....	....	....	1	....
Flat-foot.....	1	1	....	1	....	2	....	....	....	2	....
Hysterical Joint.....	....	2	....	2	....	2	....	....	....	2	....
SPINE.											
Caries and Necrosis of the Vertebrae..	2	6	4	10	....	9	....	....	1	10	2
Psoas Abscess	2	2	....	2	....	4	....	....	....	4	....
Lumbar Abscess.....	....	1	....	1	....	1	....	....	....	1	....
Concussion .....	....	1	....	1	....	1	....	....	....	1	....
TENDONS.											
Teno-synovitis .....	....	2	....	2	....	2	....	....	....	2	....
Ganglion .....	....	1	....	1	....	1	....	....	....	1	....
Contraction of Tendons..	....	1	....	1	....	1	....	....	....	1	....
“ Fasciæ .....	....	1	....	1	....	1	....	....	....	1	....
Thecal Abscess.....	2	....	....	....	....	2	....	....	....	2	....
Club-foot .....	....	1	....	1	....	....	....	....	....	....	1
Equino-varus .....	....	1	1	2	....	1	....	1	....	2	....
Talipes Equino-varus.....	....	1	....	1	....	....	....	....	....	....	1
Hammer Toe .....	....	2	....	2	....	2	....	....	....	2	....
Tendons Divided .....	....	2	....	2	....	2	....	....	....	2	....
BURSÆ.											
Enlarged Bursa Patellæ.....	....	2	2	4	1	3	....	....	....	4	....
Bursitis .....	....	6	1	7	....	7	....	....	....	7	....
<i>Carried forward</i>	99	1057	472	1529	78	1250	42	34	122	1526	102

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	99	1057	472	1529	78	1250	42	34	122	1526	102
Bursal Abscess.....		1	1	2	....	2	....	....	....	2	....
INJURIES.											
GENERAL INJURIES.											
Wounds:											
Contused		4	....	4	....	4	....	....	....	4	....
Punctured		2	....	2	....	2	....	....	....	2	....
Poisoned		1	....	1	....	....	....	....	....	....	1
Burus	5	36	26	62	5	41	1	1	11	59	8
Multiple Injury.....	5	55	12	67	....	44	1	1	22	68	4
“ Contusions	3	28	3	31	3	29	....	1	1	34	....
Gunshot Wounds.....		6	6	12	....	12	....	....	....	12	....
Apnœa from Immersion.....		....	1	1	....	1	....	....	....	1	....
From Drowning		2	....	2	....	2	....	....	....	2	....
Exposure to Cold.....		2	2	4	....	2	....	....	....	2	2
Cicatricial Contraction.....		....	1	1	....	1	....	....	....	1	....
LOCAL INJURIES.											
OF THE HEAD.											
Contusion		2	....	2	....	2	....	....	....	2	....
Scalp-wound: bone not exposed.....	3	45	20	65	6	56	1	1	1	65	3
“ bone exposed	1	31	16	47	2	42	1	....	2	47	1
Concussion of the Brain		22	....	22	1	16	3	....	1	21	1
Fracture of the Vault of the Skull.....		3	1	4	....	1	....	....	3	4	....
Simple, without depression		1	....	1	....	1	....	....	....	1	....
“ with depression		3	....	3	....	1	....	....	2	3	....
Compound, without depression.....		5	....	5	....	5	....	....	....	5	....
“ with depression		13	....	13	....	8	....	....	4	12	1
Meningeal Hemorrhage.....		1	....	1	....	....	....	....	1	1	....
Fracture of the Base of the Skull		10	2	12	....	3	....	....	8	11	1
Compression Brain .....		....	1	1	....	....	....	....	1	1	....
OF THE FACE.											
Contusion.....		4	3	7	....	7	....	....	....	7	....
Wound.....	1	54	10	64	6	58	....	....	....	64	1
<i>Carried forward</i>	117	1388	577	1965	101	1590	49	38	179	1957	125

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	117	1388	577	1965	101	1590	49	38	179	1957	125
Fraeture of the Facial Bones		1	..	1	..	1	..	..	..	1	..
“ “ Nose		3	2	5	2	2	..	1	..	5	..
“ “ Nose, compound		6	..	6	..	5	..	..	1	6	..
“ “ Upper Jaw		2	..	2	..	2	..	..	..	2	..
“ “ Zygoma, compound		1	..	1	..	1	..	..	..	1	..
“ “ Lower Jaw	1	3	..	3	..	3	..	1	..	4	..
Dislocation of the Jaw		1	..	1	..	1	..	..	..	1	..
Fraeture Lower Jaw, compound		10	2	12	..	12	..	..	..	12	..
OF THE NECK.											
Contusion		3	..	3	..	3	..	..	..	3	..
Fracture of the Cartilages of the Larynx		1	..	1	..	1	..	..	..	1	..
After Tracheotomy .....		..	1	1	..	1	..	..	..	1	..
Sprain of Neck		4	..	4	2	2	..	..	..	4	..
Wound of the Neck		3	1	4	..	4	..	..	..	4	..
Cut Throat	1	6	1	7	..	5	..	..	2	7	1
Foreign Bodies in the Air-passages . .		1	1	2	..	1	1	..	..	2	..
Foreign Bodies in the Œsophagus		1	1	2	..	1	..	..	1	2	..
OF THE CHEST.											
Contusion	1	14	4	18	3	16	..	..	..	19	..
Fracture of the Ribs or Costal Carti- lages without injury to the lung		28	8	36	..	36	..	..	..	36	..
Fracture of the Ribs or Costal Carti- lages with injury to the lung	1	5	..	5	1	2	..	..	2	5	1
Wound of the Thoracic Parietes		2	..	2	..	2	..	..	..	2	..
Perforating Wound of the Chest		1	..	1	..	1	..	..	..	1	..
Bullet Wound		1	..	1	..	1	..	..	..	1	..
OF THE BACK.											
Contusion		30	8	38	2	33	..	1	..	36	2
Sprain		5	1	6	3	3	..	..	..	6	..
Wound		2	..	2	..	2	..	..	..	2	..
Fracture of the Spine		9	..	9	..	2	..	1	5	8	1
<i>Carried forward</i>	121	1531	607	2138	114	1733	50	42	190	2129	130

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	121	1531	607	2138	114	1733	50	42	190	2129	130
Injury of the Spinal Cord without known fracture.....	1	....	....	....	....	1	....	....	....	1	....
Fracture of the Spinous Process .....	....	1	....	1	....	1	....	....	....	1	....
Dislocation Vertebrae.....	....	2	....	2	....	2	....	....	....	2	....
OF THE ABDOMEN.											
Contusion .....	....	10	1	11	1	10	....	....	....	11	....
Wound of the Abdominal Parietes....	....	2	....	2	....	2	....	....	....	2	....
Wound of the Abdominal Parietes with protrusion of uninjured Vis- cera .....	....	1	....	1	....	....	....	....	1	1	....
Wound of the Abdominal Parietes with protrusion of wounded Vis- cera .....	....	1	....	1	....	1	....	....	....	1	....
Punctured Wound of Kidney .....	....	1	....	1	....	1	....	....	....	1	....
Rupture of Kidney .....	....	3	....	3	....	3	....	....	....	3	....
OF THE PELVIS.											
Contusion .....	....	2	....	2	1	1	....	....	....	2	....
Wound of the Male Perineum.....	....	1	....	1	....	1	....	....	....	1	....
“ “ Scrotum and Penis .....	....	2	....	2	....	2	....	....	....	2	....
“ “ Female Perineum and Vulva.....	....	....	2	2	....	2	....	....	....	2	....
Fracture or Dislocation of the Pelvis ..	2	5	1	6	....	6	....	....	2	8	....
Fracture or Dislocation of the Pelvis, with Rupture of the Bladder.....	....	1	....	1	....	....	....	....	....	....	1
Fracture Pelvis, Comp. ....	....	1	....	1	....	....	....	....	....	....	1
OF THE UPPER EXTREMITIES.											
Contusion	1	9	4	13	2	12	....	....	....	14	....
Sprain.....	....	6	....	6	....	6	....	....	....	6	....
Wound	2	65	12	77	4	70	1	1	....	76	3
Foreign Bodies.....	....	2	1	3	....	2	....	1	....	3	....
Separation of Epiphyses.....	....	1	....	1	....	1	....	....	....	1	....
Gunshot Wounds .....	....	1	....	1	....	1	....	....	....	1	....
Fracture of the Clavicle.....	1	17	3	20	....	21	....	....	....	21	....
“ “ Scapula.....	....	1	1	2	....	2	....	....	....	2	....
<i>Carried forward</i>	128	1666	632	2298	122	1881	51	44	193	2291	135

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	128	1666	632	2298	122	1881	51	44	193	2291	135
Fracture of the Humerus	3	21	11	32	1	30	.....	.....	1	32	3
“ “ “ Comp.....	1	1	...	1	.....	2	.....	.....	.....	2	.....
Ununited Fracture of Humerus .....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Subluxation of Humerus.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Subluxation of Radius.....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Fracture of Radius.....	.....	16	10	26	.....	26	.....	.....	.....	26	.....
“ “ Comp.....	1	2	1	3	.....	2	1	.....	1	4	.....
“ Ulna.....	.....	1	5	6	.....	6	.....	.....	.....	6	.....
“ “ Comp .....	.....	1	1	2	.....	2	.....	.....	.....	2	.....
“ Radius and Ulna.....	.....	7	4	11	.....	11	.....	.....	.....	11	.....
“ “ “ Comm.....	.....	.....	1	1	.....	.....	.....	.....	1	1	.....
“ “ “ Comp. ....	.....	3	.....	3	.....	3	.....	.....	.....	3	.....
“ Olecranon	1	3	.....	3	.....	3	.....	.....	.....	3	1
“ “ Comp.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
“ Elbow Joint.....	1	8	3	11	.....	12	.....	.....	.....	12	.....
“ External Condyle.....	.....	3	.....	3	.....	3	.....	.....	.....	3	.....
“ Internal “ .....	.....	3	1	4	.....	4	.....	.....	.....	4	.....
T Fracture of Elbow Joint .....	.....	.....	1	1	.....	1	.....	.....	.....	1	.....
Fracture of Phalanges.....	.....	1	.....	1	1	.....	.....	.....	.....	1	.....
“ “ Comp. ....	.....	35	7	42	1	38	.....	1	.....	40	2
“ Metacarpus .....	.....	3	.....	3	.....	3	.....	.....	.....	3	.....
“ “ Comp.....	.....	2	.....	2	.....	2	.....	.....	.....	2	.....
Dislocation of the Sterno-clavicular Joint.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Dislocation of the Acromio-clavicular Joint.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
Dislocation of the Shoulder.....	.....	14	8	22	.....	21	1	.....	.....	22	.....
“ “ “ Double ...	.....	.....	1	1	.....	.....	.....	.....	.....	.....	1
“ “ Elbow .....	.....	4	6	10	.....	9	.....	.....	.....	9	1
“ “ “ Comp.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
“ “ Wrist.....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
“ “ “ Comp. ....	.....	1	.....	1	.....	1	.....	.....	.....	1	.....
<i>Carried forward</i>	135	1802	693	2495	125	2068	53	45	196	2487	143

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	135	1802	693	2495	125	2068	53	45	196	2487	143
Dislocation of the Thumb		2	....	2	....	2	....	....	....	2	....
“ “ Phalanges, Comp.		5	1	6	....	6	....	....	....	6	....
“ “ Metacarpals, Comp.		1	....	1	....	1	....	....	....	1	....
Suppurating Stump.....		....	1	1	....	....	....	....	....	....	1
OF THE LOWER EXTREMITIES.											
Contusion		67	10	77	2	73	....	....	....	75	2
Sprain.....	1	37	12	49	....	49	....	....	....	49	1
Wound.....	6	53	4	57	7	56	....	....	....	63	....
Wounds of the Joints.....	1	4	....	4	....	3	....	....	....	3	2
Foreign Bodies Imbedded.....		3	1	4	1	3	....	....	....	4	....
Gunshot Wounds		1	....	1	....	1	....	....	....	1	....
Crush of Leg.....		2	....	2	....	2	....	....	....	2	....
Fracture of the Femur	5	37	22	59	....	50	....	....	6	56	8
“ “ “ Comp.....	1	1	....	1	....	2	....	....	....	2	....
“ “ Cervix Femoris.....	5	13	7	20	....	19	....	....	2	21	4
Intracapsular		2	....	2	....	....	....	....	....	....	2
Extracapsular .....		....	1	1	....	....	....	....	....	....	1
Fracture of Femur and B. B. Leg.....		1	....	1	....	1	....	....	....	1	....
“ Metatarsals, Comp.....	1	3	....	3	1	3	....	....	....	4	....
“ the Patella.....	1	6	3	9	....	8	....	....	....	8	2
“ “ Tibia.....	2	31	5	36	1	31	....	....	....	32	6
“ “ “ Comp.....	....	6	1	7	....	5	1	....	....	6	1
“ “ Fibula.....	7	86	15	101	7	93	1	....	1	102	6
“ “ “ Comp.....	....	1	....	1	....	1	....	....	....	1	....
“ “ Tibia	6	60	19	79	3	68	....	....	....	71	14
“ “ “ Comp.....	5	20	3	23	....	24	....	....	....	24	4
“ B. B. Leg and Comp. Fracture Femur.....	1	....	....	....	....	1	....	....	....	1	....
Fracture of the Bones of the Foot.....		19	3	22	1	19	....	1	....	21	1
“ “ “ “ “ Comp.	2	11	1	12	....	13	....	....	....	13	1
“ “ Ankle, Comp.....	....	1	1	2	....	2	....	....	....	2	....
“ “ Phalanges, Comp.....	....	1	....	1	....	1	....	....	....	1	....
<i>Carried forward</i>	179	2276	803	3079	148	2605	55	46	205	3059	199

SURGICAL DISEASES. — *Continued.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	179	2276	803	3079	148	2605	55	46	205	3059	199
Dislocation of the Hip	1	1	1	2	....	3	....	....	....	3	....
“ “ Knee, compound ...	2	....	....	....	....	2	....	....	....	2	....
Fracture and Dislocation of Ankle....	....	....	1	1	....	1	....	....	....	1	....
Dislocation of the Ankle.....	1	....	....	....	....	1	....	....	....	1	....
“ “ Foot, compound....	....	2	....	2	....	1	....	....	....	1	1
“ “ Astragalus .....	....	2	1	3	....	3	....	....	....	3	....
“ “ “ comp....	1	1	....	1	....	2	....	....	....	2	....
“ “ Calcaneum.....	....	1	....	1	....	1	....	....	....	1	....
“ “ Metatarsus, comp... ..	....	1	....	1	....	....	....	....	1	1	....
NOT CLASSIFIED.											
Foreign Substances in the Cellular Tissue .....	....	1	2	3	....	3	....	....	....	3	....
Old Sinuses.....	....	1	2	3	....	3	....	....	....	3	....
Secondary Hemorrhage .....	....	1	....	1	....	1	....	....	....	1	....
Hæmatoma .....	....	2	....	2	....	2	....	....	....	2	....
POISONED WOUNDS.											
By Animals .....	....	1	....	1	....	1	....	....	....	1	....
By Morbid Secretions.....	....	1	....	1	....	1	....	....	....	1	....
CONGENITAL MALFORMATIONS.											
Hypospadias .....	....	1	....	1	....	....	....	1	....	1	....
Spina Bifida.....	....	1	....	1	....	1	....	....	....	1	....
Fingers and Toes Conjoined .....	....	1	....	1	....	....	....	....	....	....	1
Testicle retained in the Inguinal Canal, .....	....	1	....	1	....	1	....	....	....	1	....
Absence of Vagina and Uterus.....	....	....	1	1	....	....	....	1	....	1	....
Knock-Knee.....	....	1	....	1	....	....	1	....	....	1	....
MEDICAL CASES.											
No Disease .....	....	4	7	11	2	2	....	7	....	11	....
No Diagnosis.....	....	6	5	11	....	5	2	4	....	11	....
Malaria .....	....	1	....	1	....	1	....	....	....	1	....
Alcohol .....	....	2	1	3	3	....	....	....	....	3	....
Diarrhœa .....	....	....	2	2	....	2	....	....	....	2	....
<i>Carried forward</i>	184	2309	826	3135	153	2642	58	59	206	3118	201

SURGICAL DISEASES. — *Concluded.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	184	2309	826	3135	153	2642	58	59	206	3118	201
NOT CLASSIFIED.											
Retained Placenta			1	1		1				1	
Transverse Myelitis.....		1		1			1			1	
General Tuberculosis.....		1		1					1	1	
Vomiting			1	1		1				1	
Œdema of Lip			1	1	1					1	
Œdema of Soft Palate:.....		1		1	1					1	
Alveolar Hemorrhage.....		1	1	2		2				2	
Pregnancy.....			2	2			2			2	
For Removal of Grafts.....			3	3	2	1				3	
TRANSFERS.											
Transferred :											
To O. P. Medical		2	1	3		1	2			3	
“ “ Eye		1		1		1				1	
Grand Totals.....	184	2316	836	3152	157	2649	63	59	207	3135	201

SURGICAL OPERATIONS.

ON HOUSE PATIENTS IN THE SURGICAL SERVICES.

From February 1, 1892, to January 31, 1893, inclusive.

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
Amputations:										
Arm.....	3		3		2		1		3	
Toes	14		14	1	13				14	
Fingers.....	24	2	26	1	25				26	
Leg	10		10	1	6		2	1	10	2 days, exhaustion.
Thigh	3	2	5		4			1	5	3 days, cardiac, gangrene.
Breast.....		13	13		7		5	1	13	3 months, meningitis from mastoid.
Penis.....	1		1		1				1	
Cervix Uteri		1	1		1				1	
Aneurism:										
Popliteal	1		1		1				1	
Carotid.....	1		1		1				1	
Aspirations:										
Abdomen.....		2	2		2				2	
Circumcision	14		14	4	10				14	
Adhesions broken up:										
Shoulder	1		1		1				1	
Knee		3	3		3				3	
Elbow.....	2		2		2				2	
Cotting's operation, toenail		6	6		6				6	
Curetted:										
Haematoma		1	1		1				1	
Bladder		1	1		1				1	
Wound of Hand.....	2		2		1			1	2	Tetanus, 24 hours.
Empyema	10	5	15		12			3	15	Exhaustion, 3, 3, and 5 days.
Pyoneumothorax	1		1		1				1	
Carried forward...	87	36	123	7	101		8	7	123	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	87	36	123	7	101	....	8	7	123	
Excisions :										
Carpus	1	....	1	....	1	....	....	....	1	
Coccyx .....	....	2	2	....	2	....	....	....	2	
Axillary Glands .....	....	1	1	....	1	....	....	....	1	
Testicle	8	....	8	....	8	....	....	....	8	
Tonsil.....	1	....	1	....	1	....	....	....	1	
Nerve	1	....	1	....	1	....	....	....	1	
Bursa	1	....	1	....	1	....	....	....	1	
Malignant pustule	1	....	1	....	1	....	....	....	1	
Examined under ether ..	30	19	49	....	40	3	5	1	49	Peritonitis, 4 days.
Foreign Bodies removed,	1	2	3	....	3	....	....	....	3	
Needles .....	....	1	1	....	1	....	....	....	1	
Bullet	7	....	7	....	7	....	....	....	7	
Searched	3	....	3	....	3	....	....	....	3	
Cartridge	1	....	1	....	1	....	....	....	1	
Compound fractures :										
Phalanges	17	....	17	....	17	....	....	....	17	
Arm, Radius	2	1	3	....	1	....	1	1	3	4 days, exhaustion.
“ Ulna.....	1	....	1	....	1	....	....	....	1	
“ both bones	3	....	3	....	3	....	....	....	3	
Toes	2	....	2	....	2	....	....	....	2	
Leg, both bones	17	3	20	....	18	....	2	....	20	
Femur... ..	1	1	2	....	1	....	....	1	2	Prolonged shock, 3 days.
Ankle, and dislocation,	2	2	4	....	3	1	....	....	4	
Skull	13	....	13	....	7	1	4	1	13	Exhaustion, 25 days.
Nasal bones	2	....	2	....	1	....	....	1	2	5 days, delirium tremens.
Tibia	4	....	4	....	2	1	....	1	4	48 hours, delirium tremens.
Compound fracture of jaw.....	2	2	4	....	3	....	....	1	4	2 days, meningitis.
Fractures wired :										
Humerus	1	....	1	....	1	....	....	....	1	
Hernia :										
Herniotomy.....	9	4	13	....	11	....	1	1	13	Peritonitis, 2 days.
McBirney operation...	1	1	2	....	1	....	....	1	2	Peritonitis, 36 hours.
<i>Carried forward...</i>	219	75	294	7	244	6	21	16	294	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	219	75	294	7	244	6	21	16	294	
Heaton's operation....	1	....	1	....	1	....	....	....	1	
Umbilical, Strangulated.....	....	1	1	....	....	....	....	1	1	5 days, perforation.
Femoral, Strangulated, ....	....	1	1	....	....	....	....	1	1	5 hours, shock.
Inguina' " .	1	1	2	....	1	....	....	1	2	2 hours, shock.
MacEwen's operation,	3	....	3	....	2	....	1	....	3	
Radical cure.....	3	....	3	....	3	....	....	....	3	
Incisions :										
Carbuncle.....	....	3	3	....	3	....	....	....	3	
Alveolar abscess.....	4	1	5	....	5	....	....	....	5	
Wall abdomen, abscess,	1	2	3	....	2	....	....	1	3	2 months, exhaustion.
For pyæmia .....	....	1	1	....	....	....	....	1	1	2 months, exhaustion.
Abscess :										
Knee	5	3	8	....	6	....	1	1	8	Exhaustion, 18 days.
Face.....	1	2	3	....	3	....	....	....	3	
Laryngeal.....	1	....	1	....	1	....	....	....	1	
Groin.....	....	1	1	....	1	....	....	....	1	
Neck, superficial	8	4	12	....	10	....	2	....	12	
“ deep	7	2	9	....	7	....	1	1	9	Exhaustion, 2 weeks.
Scalp.....	3	1	4	....	4	....	....	....	4	
Arm.....	10	....	10	....	10	....	....	....	10	
Prevesicle.....	2	1	3	....	2	....	1	....	3	
Axilla	12	5	17	2	13	....	2	....	17	
Lumbar.....	2	1	3	....	3	....	....	....	3	
Back	3	2	5	....	4	....	1	....	5	
Buttock	5	2	7	....	6	....	....	1	7	Exhaustion, 72 hours.
Chest.....	2	1	3	....	3	....	....	....	3	
Hand	14	2	16	....	16	....	....	....	16	
Ischio rectal.....	22	8	30	1	28	....	1	....	30	
Nose.....	....	1	1	....	1	....	....	....	1	
Hip	2	1	3	....	3	....	....	....	3	
Leg	14	2	16	....	14	....	2	....	16	
Popliteal.....	1	....	1	....	....	....	1	....	1	
Perineal	5	....	5	....	5	....	....	....	5	
Liver.....	1	1	2	....	....	....	1	1	2	1½ hours, exhaustion.
<i>Carried forward..</i>	352	125	477	10	401	6	35	25	477	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward.</i>	352	125	477	10	401	6	35	25	477	
Psoas.....	3	....	3	....	1	....	1	1	3	Exhaustion, 38 days.
Mammary.....	....	4	4	....	2	....	....	2	4	
Foot.....	1	....	1	....	1	....	....	....	1	
Tonsil.....	2	3	5	1	4	....	....	....	5	
Thigh.....	1	1	2	....	2	....	....	....	2	
Vulva.....	....	1	1	....	1	....	....	....	1	
Periurethral.....	6	....	6	....	5	....	1	....	6	
Penis.....	1	....	1	....	1	....	....	....	1	
Bubo.....	38	4	42	2	36	....	4	....	42	
Bursitis.....	7	....	7	....	7	....	....	....	7	
Cellulitis.....	61	14	75	3	51	1	13	7	75	{ 6 days, delirium tremens. 1 month, sepsis. 12 days, exhaustion. 14 days, alcohol and pyaemia. 8 days, exhaustion. 10 days, uræmia. 42 hours, shock.
Gangrene.....	3	....	3	....	2	....	....	1	3	6 days, exhaustion.
Erysipelas.....	2	1	3	2	....	....	....	1	3	1 month, pyaemia.
Œsophagotomy.....	1	....	1	....	....	....	....	1	1	24 hours, shock.
Laparotomies:										
Pelvic abscess.....	1	2	3	....	2	....	....	1	3	3 months, exhaustion.
Artificial anus.....	1	....	1	....	1	....	....	....	1	
Ovarian cyst.....	....	11	11	....	8	....	1	2	11	{ 5 days, cardiac. 2 days, shock.
Exploratory.....	4	1	5	....	4	....	....	1	5	12 hours, peritonitis.
Cancer liver.....	1	....	1	....	1	....	....	....	1	
Intussusception.....	....	1	1	....	....	....	....	1	1	8 hours, shock.
Intestinal suture.....	1	....	1	....	1	....	....	....	1	
Salpingitis.....	....	1	1	....	....	....	1	....	1	{ 3 days, general peritonitis. 5 days, embolus. 2 days, peritonitis.
Appendicitis.....	9	5	14	....	9	....	2	3	14	{ 5 days, intestinal obstruction.
Obstruction, Intestine	1	....	1	....	....	....	....	1	1	
Abdominal Abscess..	2	....	2	....	....	....	1	1	2	14 days, exhaustion.
Gastric Ulcer.....	....	1	1	....	1	....	....	....	1	
Peritonitis.....	1	..	1	....	....	....	....	1	1	18 hours.
Uterine fibroid.....	....	2	2	....	1	....	1	....	2	
Ligations, Vessels....	6	1	7	....	6	....	....	1	7	{ 8 hours, pulmonary oedema.
<i>Carried forward...</i>	505	178	683	18	548	7	60	50	683	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	505	178	683	18	548	7	60	50	683	
Aneurism	1	....	1	...	1	....	....	....	1	
Litholopaxy	5	....	5	...	3	....	1	1	5	8 days, uraemia.
Necrosis and Caries :										
Skull	1	....	1	....	1	....	....	....	1	
Ilium .....	....	1	1	....	1	....	..	....	1	
Fibula	2	....	2	....	2	....	....	....	2	
Tibia	4	2	6	....	5	....	1	....	6	
Humerus	1	....	1	....	1	....	....	....	1	
Forearm	1	....	1	...	1	....	....	....	1	
Lower Jaw	5	....	5	...	4	....	1	....	5	
Elbow .....	....	1	1	....	1	....	....	....	1	
Carpus	1	1	2	....	2	....	....	....	2	
Ribs	2	....	2	....	2	....	....	....	2	
Sternum	2	1	3	....	2	....	...	1	3	{ 5 days, general tuberculosis and meningitis.
Femur	4	1	5	....	4	....	1	..	5	
Sacro iliae	1	....	1	....	1	....	....	....	1	
Tarsus	2	2	4	....	4	....	....	....	4	
Metatarsus	2	....	2	....	2	....	....	....	2	
Periostitis .....	....	1	1	1	....	....	....	....	1	
Hammer Toe	1	....	1	....	1	....	....	....	1	
Tendon Suture	17	..	17	....	16	...	1	....	17	
Neurectomy .....	....	1	1	....	1	....	....	....	1	
Osteoclasis .....	....	2	2	....	....	....	2	....	2	
Phimosi s	1	....	1	....	1	....	....	....	1	
Osteotomy	1	...	1	....	1	....	....	....	1	
Perineal Section for Extravasation of Urine ..	4	....	4	....	4	....	....	....	4	
For Cystitis	1	....	1	....	1	....	....	....	1	
Plastics :										
For Prolapse Uterus ..	....	1	1	....	1	....	....	....	1	
Painful Cicatrix	1	....	1	....	1	....	....	....	1	
Skin Graft	14	6	20	4	11	2	3	....	20	
Removal of Skin for Grafts	2	3	5	4	1	....	....	....	5	
<i>Carried forward...</i>	581	201	782	27	624	9	70	52	782	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not. Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	581	201	782	27	624	9	70	52	782	
Rectum :										
Imperforate.....	....	1	1	....	1	....	....	....	1	
Fissure dilated.....	4	5	9	1	8	....	....	....	9	
Fistula cut.....	20	5	25	1	23	1	....	....	25	
“ curetted	2	....	2	....	2	....	....	....	2	
Hæmorrhoids :										
Cut.....	1	....	1	....	1	....	....	....	1	
Cauterized.....	14	2	16	2	14	....	....	....	16	
Ligated	10	12	22	3	19	....	....	....	22	
Polyp.....	1	....	1	....	1	....	....	....	1	
Stricture.....	1	...	1	....	1	....	....	....	1	
Prolapse Rectum ..	....	1	1	....	1	....	....	....	1	
Lacerated Cervix .....	...	2	2	....	2	....	....	....	2	
Dislocations reduced :										
Radius.....	....	2	2	....	1	...	1	....	2	
Ankle	3	....	3	....	3	....	....	....	3	
Colles Fracture.....	11	2	13	....	13	....	....	....	13	
Elbow.....	6	3	9	....	9	....	....	....	9	
“ comp.....	1	....	1	....	1	....	....	....	1	
Hip	1	1	2	....	2	....	....	....	2	
Pott's Fracture	1	1	2	....	2	....	....	....	2	
Shoulder.....	16	4	20	....	20	....	....	....	20	
Dislocations reduced :										
Fingers, comp.	2	....	2	....	2	....	....	....	2	
Fingers.....	1	....	1	....	1	....	....	....	1	
Thumb.....	1	....	1	....	1	....	....	....	1	
Prostatectomy	1	....	1	....	....	....	1	....	1	
Resection Jaw.....	2	1	3	....	1	....	2	....	3	
Sutured Wounds :										
Face.....	48	8	56	3	53	....	....	....	56	
Upper Extremities....	40	9	49	2	46	....	1	....	49	
Lower Extremities..	24	6	30	1	28	....	1	....	30	
<i>Carried forward...</i>	792	266	1058	40	880	10	76	52	1058	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	792	266	1058	40	880	10	76	52	1058	
Scalp.....	68	17	85	1	80	....	1	3	85	{ 3 days, delirium tremens. 2 days, delirium tremens. 6 hours, fracture at base of skull.
Knee.....	4	....	4	....	4	....	....	....	4	
Ear.....	3	....	3	....	3	....	....	....	3	
Scrotum.....	2	....	2	....	2	....	....	....	2	
Cut Throat.....	5	....	5	....	4	....	....	1	5	12 hours, hæmorrhage.
Wrist	2	....	2	....	2	....	....	....	2	
Tenotomy :										
Club Foot.....	2	....	2	....	1	....	1	....	2	
Tendo Achilles.....	1	1	2	....	2	....	....	....	2	
Flexor Fingers.....	1	....	1	....	1	....	....	....	1	
Ham-string Tendons..	1	....	1	....	1	....	....	....	1	
Tracheotomy :										
Foreign Body.....	2	1	3	....	1	....	2	....	3	
Intubation.....	....	1	1	....	....	....	....	1	1	Apnoea—operation for goitre.
Trephine Scull.....	3	....	3	....	3	....	....	....	3	
Meningeal tumor	1	....	1	....	....	....	....	1	1	24 hours, cerebral meningitis.
Cyst Antrum.....	1	....	1	....	1	....	....	....	1	
Bullet Wound.....	1	....	1	....	....	....	....	1	1	3 weeks, hernia cerebri.
Epithelioma, Ear	1	....	1	....	1	....	....	....	1	
“ Face.....	2	....	2	....	2	....	....	....	2	
“ Nose.....	2	....	2	....	2	....	....	....	2	
“ Lip	11	....	11	....	11	....	....	....	11	
“ Tongue..	3	....	3	....	3	....	....	....	3	
“ Neck	4	....	4	1	3	....	....	....	4	
“ Jaw.....	2	....	2	....	1	....	....	1	2	6 hours, shock.
“ Perineum .....	....	1	1	....	1	....	....	....	1	
Adenoma	2	....	2	1	1	....	....	....	2	
Cancer, breast .....	....	12	12	....	12	....	....	....	12	
Fibroma, breast.....	....	3	3	....	3	....	....	....	3	
Dermoid Cyst.....	....	2	2	....	2	....	....	....	2	
Cancer, uterus.....	....	1	1	....	1	....	....	....	1	
Fibroid, uterus.....	....	1	1	....	....	....	....	1	1	Traumatic peritonitis, 4 hours.
<i>Carried forward...</i>	916	306	1222	43	1028	10	80	61	1222	

SURGICAL OPERATIONS. — *Continued.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	916	306	1222	43	1028	10	80	61	1222	
Angioma	2	3	5	....	5	....	....	....	5	
Haematoma	2	1	3	....	3	....	....	....	3	
Lipoma.....	3	6	9	1	8	....	....	....	9	
Cancer anus.....	....	1	1	....	1	....	....	....	1	
Ganglion	1	....	1	....	1	....	....	....	1	
Fibroma	2	2	4	....	4	....	....	....	4	
Tuberculosis:										
Wrist.....	1	....	1	....	1	....	....	....	1	
Pubes .....	....	1	1	....	1	....	....	....	1	
Sarcoma:										
Antrum.....	....	1	1	....	1	....	....	....	1	
Back.....	....	1	1	....	1	....	....	....	1	
Axilla	1	....	1	....	1	....	....	....	1	
Pharynx.....	1	....	1	....	1	....	....	....	1	
Neck .....	....	3	3	....	3	....	....	....	3	
Thigh.....	....	2	2	....	2	....	....	....	2	
Scrofulous glands.....	12	13	25	....	24	....	1	....	25	
Wen	1	....	1	....	1	....	....	....	1	
Lympho-Sarcoma.....	....	2	2	....	....	....	2	....	2	
Hysterectomy:										
Abdomen.....	....	1	1	....	....	....	....	1	1	3 months, exhaustion.
Strictures:										
Dilated	1	....	1	....	1	....	....	....	1	
Urethrotomy, int.....	18	....	18	....	16	....	2	....	18	
Urethrotomy, ext	20	....	20	....	19	....	1	....	20	
Urethrotomy, int. and ext	15	....	15	1	14	....	....	....	15	
Meatomy	1	....	1	....	1	....	....	....	1	
Hydrocele rad. cure ..	9	....	9	....	9	....	....	....	9	
Varicocele.....	5	....	5	....	4	....	1	....	5	
Nephrorrhaphy .....	....	1	1	....	1	....	....	....	1	
Nephrectomy	2	....	2	....	2	....	....	....	2	
Nephrotomy.....	2	....	2	....	2	....	....	....	2	
Urethral calculus.....	1	....	1	....	1	....	....	....	1	
<i>Carried forward...</i>	1016	344	1360	45	1156	10	87	62	1360	

SURGICAL OPERATIONS. — *Concluded.*

OPERATIONS.	Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	In Hospital.	Died.	Total.	REMARKS.
<i>Brought forward...</i>	1016	344	1360	45	1156	10	87	62	1360	
Spastic arm.....	1	....	1	....	1	....	....	....	1	
Webbed fingers.....	1	....	1	....	....	....	1	....	1	
Stricture Larynx.....	....	1	1	....	....	1	....	....	1	
Spina Bifida.....	....	1	1	....	1	....	....	....	1	
Laminectomy	1	....	1	....	....	....	1	....	1	
Grand total.....	1019	346	1365	45	1158	11	89	62	1365	

DISEASES OF THE EYE.

*Cases treated in Hospital from February 1, 1892, to January 31, 1893.
inclusive.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital, Jan. 31, 1893.
		Men.	Women.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total	
CONJUNCTIVA.											
Conjunctivitis, catarrhal.....			3	3	2	1	...	...	...	3	...
“ phlyctenular	2	...	4	4	4	1	...	...	...	5	1
“ gonorrhœal	1	...	2	2	1	2	...	...	...	3	...
“ diphtheritic..	1	...	...	...	1	...	...	...	...	1	...
“ traumatic. ....	...	2	1	3	2	1	...	...	...	3	...
Blennorrhœa neonatorum.....	...	5	...	5	3	1	...	...	1	5	...
Trachoma.....	...	1	1	2	1	1	...	...	...	2	...
Ecchymosis.....	...	2	...	2	2	...	...	...	...	2	...
Burns.....	...	3	...	3	2	1	...	...	...	3	...
Foreign bodies.....	...	2	...	2	1	1	...	...	...	2	...
CORNEA AND SCLEROTICA.											
Keratitis :											
“ interstitial... ..	...	...	1	1	...	1	...	...	...	1	...
“ phlyctenular .....	...	3	5	8	3	3	1	...	...	7	1
“ fascicular. ....	...	...	2	2	...	2	...	...	...	2	...
“ traumatic.....	...	2	...	2	2	...	...	...	...	2	...
Ulcer.....	...	1	3	4	1	3	...	...	...	4	...
Opacity.....	...	1	1	2	...	2	...	...	...	2	...
Burns .....	...	1	..	1	1	...	...	...	...	1	...
Wounds.....	1	3	..	3	1	3	...	...	..	4	...
Staphyloma .....	...	...	1	1	1	...	...	...	...	1	...
Tumors.....	...	1	3	4	4	...	...	...	...	4	...
Carried forward.....	5	27	27	54	32	23	1	...	1	57	2

DISEASES OF THE EYE. — *Concluded.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Males.	Females.	Total.	Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	5	27	27	54	32	23	1	....	1	57	2
LENS.											
Cataract:											
“ senile.....	1	4	8	12	7	5	....	....	....	12	1
“ capsular.....	...	1	1	2	....	2	....	....	....	2	....
“ polar.....	1	1	....	1	....	....	....	1	....
Dislocation.....	4	....	4	1	3	....	....	....	4	....
GLOBE.											
Panophthalmitis.....	1	3	4	3	....	....	....	....	3	1
Foreign Body in the Globe	2	....	2	....	2	....	....	....	2	....
REFRACTION AND ACCOMMODATION.											
Hypermetropia.....	1	1	....	1	....	....	....	1	....
LACHRYMAL APPARATUS.											
Abscess of Sac.....	1	1	1	....	....	....	....	1	....
LIDS.											
Blepharitis	3	1	4	1	2	1	....	....	4	....
Abscess	1	1	....	1	....	....	....	1	....
Entropion.....	2	1	3	2	1	....	....	....	3	....
Ectropion....	1	....	1	....	1	....	....	....	1	....
Trichiasis	1	1	1	....	....	....	....	1	....
Wounds.....	1	...	1	1	....	....	....	....	1	....
ORBIT.											
Abscess	1	1	2	....	1	....	....	1	2	....
IRIS, CILIARY BODY AND CHOROID.											
Iritis:											
“ rheumatic	1	1	1	....	....	....	....	1	....
“ syphilitic	3	....	3	1	2	....	....	....	3	....
Glaucoma	1	2	3	1	2	....	....	....	3	....
RETINA AND OPTIC NERVE.											
Neuritis.....	1	1	1	....	....	....	....	1	....
MISCELLANEOUS.											
No Disease	2	2	....	....	....	2	....	2	....
Referred to Surgical Department.....	1	1	....	....	....	1	....	1	....
Grand total.....	6	51	54	105	53	47	2	3	2	107	4

DISEASES OF THE EAR.

Cases treated in Hospital from February 1, 1892, to January 31, 1893.

	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.				Remaining in Hos- pital Jan. 31, 1893.
		Right Ear.	Left Ear.	Both Ears.	Well.	Relieved.	Not Relieved.	Died.	
MORBI AURIS EXTERNÆ.									
Haematoma Idiopathicum.....		1				1			
MORBI AURIS MEDIÆ.									
<i>Tympani Tubæ Eustachii et Portionis Mastoidæ.</i>									
Otitis media simplex.....		5	1	4	8	2			
Otitis catarrhalis secernens acuta.....	2	1			3				
Otitis media suppurativa acuta	1	5	5	2	6	7			
Otitis media suppurativa chronica.....		3	3		1	3			2
Otitis media suppurativa chronica cum polypo tympani		2	1	1		2	1		1
Otitis media suppurativa cum carie meatus.....		1				1			
Otitis media suppurativa cum thrombosis sinus lateralis.....		1						1	
Otitis media suppurativa cum meningitide.....		1		1				2	
Otitis media suppurativa cum periostide mas- toidæ			4		1	1			2
Otitis media suppurativa cum ostitide mastoidæ		3	5	1	6	2		1	
Otitis media suppurativa cum carie mastoidæ ..		1				1			
Otitis media serosa acuta cum hyperaemia mas- toidæ		1							1
Otitis media suppurativa chronica cum osteo- sclerosis mastoidæ			1			1			
Effectus otitis media suppurativa chronica	1	2		1	2	2			
Periostitis mastoidæ.. ..		1				1			
MORBI NARIUM ET NASO-PHARYNGIS.									
Scoliosis septi narium.....			1	8		9			
Hyperplasia tonsillæ pharyngis				1	1				
Carried forward	4	28	21	19	28	33	1	4	6

DISEASES OF THE EAR. — *Concluded.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.				Remaining in Hos- pital Jan. 31, 1893.
		Right Ear.	Left Ear.	Both Ears.	Well.	Relieved.	Not Relieved.	Died.	
<i>Brought forward</i>	4	28	21	19	28	33	1	4	6
Adenoids		2	...	1	...	3	...	...	...
Carcinoma tonsillae pharyngis.....		...	...	1	...	1	...	...	...
NEUROSES AURIS MEDIÆ.									
<i>Sensoriæ.</i>									
Otalgia Pharyngealis... ..		1	...	...	1	...	...	...	...
UNCLASSIFIED.									
No disease of ear .....		...	1	2	1	2	...	...	...
Caries, Malleus and Incus		1	...	...	...	1	...	...	...
Carbuncle.....		...	1	...	...	1	...	...	...
Total	4	32	23	23	30	41	1	4	6

Females56

Males.....35

91

Counted twice 9

Total82

Admitted.....78

Discharged.....76

AURAL CASES TREATED ON OTHER HOUSE SERVICES.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	In Hospital, Feb. 1, 1892.	ADMITTED.			DISCHARGED.				Remaining in Hos- pital, Jan. 31, 1893.
		Right Ear.	Left Ear.	Both Ears.	Well.	Relieved.	Not Relieved.	Died.	
MORBI AURIS EXTERNÆ.									
I. Inflammationes Meatus:									
Otitis externa diffusa		4	2	....	6	....	....	....
Otitis externa disquamativa.		3	1	1	3	1	....	....	1
II. Anomalie Secretionum:									
Accumulatio ceruminis ..		2	2	1	3	1	....	....	1
MORBI AURIS MEDIÆ.									
I. Membrana Tympani:									
Trauma indirecta		1	....	....	1	....	....	....
II. Tympani Tubæ Eustachii et Portionis Mastoidæ.									
Otitis catarrhalis secernens serosa acuta.....		3	1	..	....	4	....	....
Otitis catarrhalis secernens serosa chronica.....		1	3	1	..	5	....	....
Otitis catarrhalis secernens mucosa acuta .....		....	....	3	2	1	....	....
Otitis media acuta simplex	2	3	6	1	8	4	....	....
Otitis media diphtheritica		2	1	....	....	2	1	....
Otitis catarrhalis adhesiva.....		1	1	....	....	1	....	1	....
Otitis catarrhalis adhesiva ex secernente.....		....	....	1	....	1	....	....
Otitis media suppurativa acuta.....	6	28	21	10	33	26	....	4	2
Otitis media suppurativa chronica.....		4	11	3	....	15	....	....	3
Otitis media suppurativa cum polypo tympani..		2	..	....	....	1	1	....
Otitis media suppurativa cum meningitide.....		1	..	....	....	....	....	1	....
Effectus otitis media suppurativa.....		2	3	....	....	5	....	....
NEUROSES AURIS MEDIÆ.									
I. Sensoriæ:									
Otalgia Pharyngealis...		2	....	....	....	2	....	....
Carried forward	8	59	52	21	56	69	2	6	7

ANNUAL REPORT OF
AURAL CASES. — *Concluded.*

DISEASES.	In Hospital Feb. 1, 1892.	ADMITTED.			DISCHARGED.				Remaining in Hos- pital Jan. 31, 1893.
		Right Ear.	Left Ear.	Both Ears.	Well.	Relieved.	Not Relieved.	Died.	
<i>Brought forward</i>	8	59	52	21	56	69	2	6	7
MORBI LABYRINTHI.									
Labyrinthitis acuta secundaria		2	1	....	2	....	....	1	....
UNCLASSIFIED.									
Fracture basis crurum .....		....	2	....	2	....	....	....	....
No disease of ear		6	1	12	4	2	13	....	....
Totals	8	67	56	33	64	71	15	7	7

Males 94

Females 71

165

Counted twice. 1

Total 164

GYNÆCOLOGICAL DISEASES.

IN CHARGE OF DR. E. J. FORSTER.

From December 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Total Admitted.	DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
DISEASES OF URINARY SYSTEM.								
Urethritis.....	1	1	.....	.....	.....	.....	1	.....
DISEASES OF BROAD LIGAMENT.								
Pelvic Cellulitis.....	6	....	1	1	....	.....	2	4
Salpingitis.....	2	..	1	....	.....	.....	1	1
Abscess, Pelvic.....	3	1	2	....	.....	.....	3	.....
DISEASES OF THE WOMB.								
Carcinoma.....	3	....	3	....	.....	.....	3	.....
Epithelioma, Cervix.....	1	....	.....	.....	.....	.....	.....	1
Follicula Endo-Cervicitis	1	....	.....	.....	.....	.....	.....	1
Non-Malignant Tumors :								
Fibrous Tumors	1	....	.....	.....	.....	.....	.....	1
Polypus	1	....	1	....	.....	.....	1	.....
Displacements :								
Anteversio	1	..	1	....	.....	.....	1	.....
Retroversio.....	4	....	3	....	.....	.....	3	1
Prolapsus Uteri.....	2	....	.....	1	....	.....	1	1
Inflammation of Vagina	3	1	1	....	.....	.....	2	1
Inflammation of Labia.....	1	1	....	.....	.....	.....	1	.....
FUNCTIONAL DISEASES OF WOMEN.								
Menorrhagia.....	1	1	....	.....	.....	.....	1	.....
Metrorrhagia	4	....	2	1	....	.....	3	1
Pregnancy	3	....	2	....	.....	.....	2	1
Carried forward	38	5	17	3	....	.....	25	13

GYNÆCOLOGICAL DISEASES. — *Concluded.*

DISEASES.	Total Admitted.	DISCHARGED.						Remaining in Hospital Jan. 31, 1893.
		Well.	Relieved.	Not Relieved.	Not Treated.	Died.	Total.	
<i>Brought forward</i>	38	5	17	3	....	....	25	13
DISEASES OF PREGNANCY.								
Abortion	3	2	....	....	....	....	2	1
Premature Labor	1	....	....	....	....	....	....	1
Labor at Term	1	1	....	....	....	....	1	....
UNCLASSIFIED.								
Debility	1	....	1	....	....	....	1	....
Infancy	3	3	....	....	....	....	3	....
Recto-Vaginal Fistula	1	....	....	....	....	....	....	1
Laceration of Perineum... ..	5	....	2	....	1	....	3	2
Lacerated Cervix	10	6	3	....	....	....	9	1
Lacerated Cervix and Perineum	9	1	2	....	....	....	3	6
Hypertrophy of Labium Minorum.....	1	1	....	....	....	....	1	....
After Childbirth.....	2	....	....	1	1	....	2	....
Hyperemesis of Pregnancy.....	1	....	....	....	....	1	1	....
Transferred to Medical Department.....	4	....	....	1	3	....	4	....
Influenza	2	....	2	....	....	....	2	....
Threatened Abortion.....	1	....	1	....	....	....	1	....
Septicæmia.....	8	4	2	....	....	1	7	1
Chancroid.....	1	....	....	....	....	....	....	1
Total	92	23	30	5	5	2	65	27

OUT-PATIENT DEPARTMENT.

• MEDICAL.

IN CHARGE OF DRS. BOWDITCH AND JACKSON.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Males.	Females.	Total.
GENERAL DISEASES.			
A.			
Chicken-Pox.....	3	1	4
Typhoid Fever.....	6	1	7
Febricula.....	1	.....	1
Intermittent Fever	14	6	20
Malaria	6	.....	6
Hooping Cough	6	2	8
Mumps.....	2	.....	2
Influenza	1	.....	1
Erysipelas.....	2	.....	2
B.			
Acute Rheumatism.....	38	19	57
Subacute Rheumatism.....	16	11	27
Gonorrhœal Rheumatism.....	1	.....	1
Muscular Rheumatism.....	24	4	28
Chronic Rheumatism	11	13	24
Chronic Rheumatic Arthritis	2	3	5
Syphilis	16	7	23
Secondary.....	2	3	5
Serofula.....	.....	1	1
<i>Carried forward.....</i>	151	71	222

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	151	71	222
Tubercular Meningitis.....	1	.....	1
Scrofulous Disease of Glands	6	.....	6
Phthisis Pulmonalis.....	106	64	170
Hæmoptysis.....	9	.. . . .	9
Rachitis	9	.....	9
Diabetes.....	2	.....	2
Simple .....	.....	1	1
Anæmia	19	135	154
Chlorosis .....	.....	1	1
DISEASES OF THE NERVOUS SYSTEM.			
Chronic Hydrocephalus.....	1	.....	1
DISEASES OF THE NERVES.			
Locomotor Ataxy	1	.....	1
Facial Paralysis .....	.....	1	1
Neuro-Asthenia	6	8	14
Acute Neuritis	1	2	3
Alcoholic Neuritis.....	3	1	4
FUNCTIONAL DISEASES OF THE NERVOUS SYSTEM.			
Epilepsy (Single Fit)....	4	4	8
Chorea	3	3	6
Hysteria.....	.....	1	1
Neuralgia (general)	16	14	30
Facial. Tic Douloureux.....	2	1	3
Hemicrania.....	1	.....	1
Sciatica.....	7	1	8
Pleurodynia.....	9	4	13
<i>Carried forward</i>	357	312	669

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	357	312	669
Lumbago	31	3	34
Cephalalgia.....	28	27	55
Intercostal Neuralgia.....	6	1	7
Myalgia.....	4	2	6
Hyperæsthesia.....	1	.....	1
Hypochondriasis.....	4	.....	4
Vertigo	6	5	11
Neurasthenia .....	.....	5	5
Insomnia	1	1	2
DISEASES OF INTELLECT.			
Melancholia.....	.....	2	2
Paralysis of the Insane.....	1	.....	1
DISEASES OF THE CIRCULATORY SYSTEM.			
DISEASES OF THE HEART AND ITS MEMBRANES.			
Endocarditis.....	3	1	4
Valve Disease.....	.....	1	1
Aortic.....	2	1	3
Mitral.....	20	20	40
Aortic and Mitral.....	2	1	3
Functional.....	20	10	30
Weak Heart.....	6	5	11
Hypertrophy	1	.....	1
Dilatation.....	1	.....	1
Fatty Degeneration.	1	.....	1
Aneurism.....	.....	1	1
Cardiac: Variety undetermined.....	23	12	35
<i>Carried forward</i>	518	410	928

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	518	410	928
DISEASES OF THE ARTERIES.			
Arteritis.....	1	3	4
DISEASE OF THE VEINS.			
Phlebitis.....	1	1	2
DISEASES OF RESPIRATORY SYSTEM.			
Hay Asthma.....	1	.....	1
DISEASE OF NOSTRILS.			
Nasal Catarrh.....	9	5	14
DISEASES OF LARYNX.			
Laryngeal Catarrh.....	.....	2	2
DISEASES OF TRACHEA AND BRONCHI.			
Bronchitis.....	113	86	199
Acute.....	36	21	57
Chronic.....	23	16	39
Capillary.....	1	.....	1
Asthma.....	1	4	5
Fœtid Bronchitis.....	.....	1	1
DISEASES OF THE LUNG.			
Pneumonia.....	.....	1	1
Emphysema.....	5	.....	5
Acute Pneumonic Phthisis.....	1	.....	1
Chronic Pneumonic Phthisis.....	6	3	9
DISEASES OF THE PLEURA.			
Pleurisy.....	23	8	31
Chronic Pleurisy.....	1	.....	1
Empyema.....	.....	1	1
<i>Carried forward</i>	740	562	1,302

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	740	562	1,302
DISEASES OF THE DIGESTIVE SYSTEM.			
Stomatitis	1	1	2
DISEASES OF THE TEETH, GUMS, ETC.			
Bleeding Gums	1	.....	1
DISEASES OF THE FAUCES AND PALATE.			
Sore Throat	1	.....	1
Tonsillitis	4	3	7
DISEASES OF THE PHARYNX.			
Pharyngitis	13	8	21
DISEASES OF THE STOMACH.			
Gastritis	5	.....	5
Chronic Ulcer .....	.....	6	6
Dyspepsia	83	137	220
Gastrodynia	1	4	5
Gastro-Duodenitis	11	13	24
Gastric Catarrh	62	51	113
Gastric Dilatation	5	2	7
DISEASES OF THE INTESTINES.			
Appendicitis	3	.....	3
Dysentery	2	1	3
Diarrhœa	26	33	59
Constipation	73	129	202
Prolapsus Ani .....	.....	1	1
DISEASES OF THE LIVER.			
Cirrhosis	1	.....	1
Gall-Stones	2	.....	2
<i>Carried forward</i>	1,034	951	1,985

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASE.	Males.	Females.	Total.
<i>Brought forward</i>	1,034	951	1,985
DISEASES OF THE PERITONEUM.			
Ascites.....	2	.....	2
DISEASES OF URINARY SYSTEM.			
DISEASE OF THE KIDNEY.			
Bright's Kidney	1	4	5
Acute	3	.....	3
Chronic	6	4	10
Granular	2	.....	2
Pyelitis ..	1	.....	1
Diuresis	1	1	2
Renal Calculus.....	2	.....	2
DISEASES OF THE BLADDER.			
Cystitis.....	1	1	2
Incontinence of Urine.....	5	5	10
Retention of Urine.....	1	.....	1
Spermatorrhœa.....	7	.....	7
DISEASES OF WOMEN (OF THE OVARY).			
Complex Cystic Tumor .....	.....	1	1
DISEASES OF THE WOMB.			
Catarrh (Leucorrhœa).....	.....	4	4
Carcinoma .....	.....	1	1
Tumor of Breast.....	.....	1	1
FUNCTIONAL DISEASES OF WOMEN.			
Amenorrhœa.....	.....	1	1
Dysmenorrhœa.....	.....	2	2
Pregnancy.....	.....	6	6
<i>Carried forward</i>	1,066	982	2,048

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	1,066	982	2,048
Menopause		4	4
DISEASES OF PREGNANCY.			
Hysteralgia		1	1
Abortion		1	1
Vomiting of Pregnancy		1	1
DISEASES OF THE MUSCULAR SYSTEM.			
Atrophy		2	2
DISEASES OF CELLULAR TISSUE.			
Obesity		1	1
DISEASES OF CUTANEOUS SYSTEM.			
Erythema		1	1
Urticaria	4		4
Eczema	4	11	15
Pityriasis		1	1
Psoriasis	1		1
Herpes	1		1
Zoster	5		5
Bruise	3		3
Condylomata		1	1
Pruritus		1	1
Tinea Tonsurans (Ringworm)	1		1
Scabies	1		1
Dermatitis	2		2
Pediculi Capitis		1	1
Furunculosis		1	1
<i>Carried forward</i>	1,088	1,009	2,097

MEDICAL OUT-PATIENT DEPARTMENT. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	1,088	1,009	2,097
POISONS.			
METALS AND THEIR SALTS.			
Lead	4	.....	4
Alcohol	28	6	34
Abuse of Alcohol (Alcoholismus), Tea.....	.....	2	2
Ivy (Rhus tox).....	1	.....	1
Tobacco, abuse of.	7	.....	7
UNCLASSIFIED.			
Debility	75	121	196
Diagnosis undetermined.....	94	72	166
Inanition .....	.....	1	1
Surgical.....	13	6	19
Epistaxis	1	1	2
Gonorrhea.....	5	.....	5
Scattering	1	.....	1
Mastitis	1	.....	1
Impotence .....	.....	1	1
Haematemesis.....	1	.....	1
Malingering.....	1	.....	1
No Disease	1	1	2
Parasitic (Intestinal)	6	8	14
Exophthalmic Goitre .....	.....	2	2
MEMORANDA FOR OUT-PATIENT DEPARTMENT.			
Referred to Surgical Department ..	52	20	72
“ “ Skin “	17	12	29
“ “ Eye “	6	11	17
<i>Carried forward</i>	1,402	1,273	2,675

MEDICAL OUT-PATIENT DEPARTMENT. — *Concluded.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	1,402	1,273	2,675
Referred to Ear Department		2	2
“ “ Throat “	44	24	68
“ “ Nervous “	22	6	28
“ “ Women’s “		33	33
“ “ Superintendent for Admission	72	40	112
“ “ “ “ other reasons		1	1
“ “ Children’s Hospital	2		2
“ “ Dispensary		3	3
Rejected; able to pay	1	4	5
Referred to Carney Hospital	1		1
“ “ St. Luke’s		7	7
“ “ St. Elizabeth		1	1
“ “ Mass. General Hospital	1		1
“ “ House Good Samaritan	2	1	3
“ “ West End Nursery		2	2
Cramps in Neck	1		1
Cervicitis		1	1
Cervical Adenitis		2	2
Orchitis	1		1
Insomnia		1	1
Oxyuris Vermiculosis	1		1
No disease	9	3	12
Refused examination		6	6
Not treated	13	19	32
Eloped	4	4	8
Totals	1,576	1,433	3,009

OUT-PATIENT DEPARTMENT.

SURGICAL.

IN CHARGE OF DRS. MONKS, LOVETT, AND SMITH.

From February 1, 1892, to January 31, 1893, inclusive.

<i>General Diseases.</i>		<i>Brought forward</i>	
Erysipelas	4	Compound Cysts:	197
Simple	7	Sebacous	30
Phlegmonous	1		
Rheumatism	25	<i>Local Diseases.</i>	
Sub-acute	24	<i>Digestive System.</i>	
Gonorrhœal	6	Stomatitis	9
Gout	2	Ulcerative Stomatitis	3
Syphilis	14	Gingivitis	4
Primary	32	Epulis	1
Secondary	18	Ankylosis of Jaws	1
Tertiary	22	Alveolar Abscess	27
Hereditary	1	Tongue-tie	3
Diabetes	1	Cancer of Tongue	1
Marasmus	1	Follicular Tonsillitis	1
		Enlarged Tonsils	1
<i>Malignant Tumors.</i>		Stricture of the Œsophagus . .	1
[See also <i>Special Regions.</i>]		Obstipation	1
Cancer	9	Appendicitis	2
Medullary	1	Fistula	11
Epithelial	4	Hernia	1
Sarcoma	1	Umbilical	2
		Reducible	2
<i>Non-Malignant Tumors.</i>		Double Inguinal	1
[See also <i>Special Regions.</i>]		Inguinal	25
Fibrous Tumor	5	Reducible	16
Painful Subcutaneous Tu-		Irreducible	1
mor	2	Scrotal	1
Lipoma	1	Reducible	1
Angioma	1	Femoral	1
Nævus	3	Reducible	1
Wart	2	Ulceration of the Rectum . . .	4
Papilloma	1	Abscess of the Rectum	17
Fibro-lipoma	1	Ischio-rectal Abscess	2
Simple Cysts	6	Ulceration of the Anus	1
Mucous	1	Fistula in Ano	20
Fibroma	1		
<i>Carried forward</i>	197	<i>Carried forward</i>	389

<i>Brought forward</i>	389
Hemorrhoids	18
Internal	32
External	3
Fissure of the Anus	2
Prolapsus Ani	1
Warts of the Anus	1
Pruritus Ani	3

Absorbent System.

Inflammation of the Lymphatics	10
Adenitis	30
Syphilitic Bubo	4
Chancroidal Bubo	38
Gonorrhœal Bubo	3
Scrofulous Glands	75
Cervical	44
Axillary	3

Circulatory System.

Aneurism of Heart	
Simple Aneurism	1
Thrombosis	1
Varicocele	1
Phlebitis	11
Varicose Veins	40
Ruptured Varix	1

Respiratory System.

Laryngitis	2
Dislocation of tonsil (?)	1
Empyema	8

Secretory System.

Parotitis	2
Mumps	1
Abscess of the Parotid Gland	1
Abscess of the Liver	1

Urinary System.

Pyelitis	3
Floating Kidney	3
After Nephrectomy	1
Cystitis	5
Chronic Catarrh of the Bladder	1
Stone in the Bladder	2
Uric Acid	1
Irritation of the Bladder	4

Carried forward 747

<i>Brought forward</i>	747
Incontinence of Urine	2
Retention of Urine	7
Prostatitis	3
Hypertrophy of the Prostate Gland	14

Gonorrhœa and its Complications.

Gonorrhœa	140
Balanitis	13
Phimosis	9
Paraphimosis	1
Gonorrhœal Bubo	33
Epididymitis	39
Cystitis	4
Orchitis	1
Impotence	1
Gleet	10

Male Urethra.

Stricture of the Urethra	32
Organic	28
Traumatic	1
Extravasation of Urine	1

Skin.

Erythema	1
Intertrigo	1
Psoriasis	1
Herpes	6
Herpes Zoster	2
Eczema	77
Ringworm	1
Dermatitis	28
Acne	2
Chillblain	2
Frostbite	16
Ulcer	213
Ulcer, leg	56
Boil	25
Carbuncle	7
Onychia	29
Whitlow	29
Fatty Tumor of the Skin	2
Sebaceous Tumor	20
Warts	9
Corns	20
Condyloma	4
Keloid	2

Carried forward 1,639

<i>Brought forward</i>	1,639
Lupus.....	9
Ingrown Nail	23
Paronychia	28
Epithelioma.....	8
Scabies.....	5
Pediculi Capitis.....	2
“ Pubis.....	2
Ascarides... ..	1
Poisoning by Ivy.....	8
Oedema	13

Cellular Tissue.

Inflammation of the Cellular Tissue.....	308
Diffuse Inflammation of the Cellular Tissue.....	3
Abcess of the Cellular Tissue,	141
Alveolar Abcess.....	5

Blood, and of the Blood-making Glands.

Hæmophilia.....	1
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Ductless Glands.

Inflammation of the Thyroid Gland.....	1
Goitre	4

Generative Organs.

Warts of the Penis	3
Venereal Sores of the Penis..	7
Chancre.....	3
Chancroid	35
Phagedænic Sore.....	1
Serpiginous Sore....	1
Herpes Progenitalis.....	1
Phimosis	1
Paraphimosis	2
Cancer of the Penis.....	1
Inflammation of the Scrotum,	2
Abscess “ “	2
Hydrocele	28
Acquired	12
Hæmatocele	1
Varicocele	9
Orchitis :	
Acute	12

Carried forward

<i>Brought forward</i>	2,322
Chronic	3
Syphilitic Disease of the Testicle	1
Tuberculous Disease of the Testicle	6
Wound of Testicle.....	1
Spermatorrhœa	3
Fibrous Tumor of the Ovary,	2
Vulvo-vaginal Glands.....	3
Abscess of the Labium.....	1
Wounds of Labia	1

Affections connected with Parturition.

Puerperal hæmorrhage	1
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Female Breast.

Inflammation	1
Abscess of the Breast.....	7
Hypertrophy of the Breast...	1
Ulcerated Nipple.....	1
Neurosis of Breast.....	2
Cancer of the Breast.....	2
Non-malignant Tumors of the Breast	7

Nervous System.

Monoplegia.....	1
Spastic Paralysis.....	1

Spinal Cord and its Membranes.

Spinal Meningitis.....	1
Infantile Paralysis.....	2

Nerves.

Neuritis	3
Alcoholic	1
Traumatic	4
Painful Cicatrix.....	1
Resection of Infra-orbital Nerves,	1

Functional Diseases of the Nervous System.

Hysteria.....	2
Neurasthenia	7
Neuralgia	6
Facial.. ..	3

Carried forward

<i>Brought forward</i>	2,398
Sciatica	4
Coccydynia	3
Irritable Cicatrix	1

Eye.

Conjunctivitis	1
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Ear.

Disease of the Mastoid Cells,	1
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Nose.

Rhinitis	1
Divided Septum	1

Bones.

Periostitis ...	23
Ostitis	1
Exostosis	2
Chronic Abscess of Bone	11
Caries	5
Necrosis	30
Exostosis ..	2
Syphilitic Disease of the Bones.	2
Rickets	3
Tubercle of the Bones	1
Dactylitis	1
Tubercular	1

Joints.

Synovitis	112
Acute	11
Chronic	10
Arthritis	18
Ulceration of Cartilages	1
Chronic Tubercular Arthritis,	42
" Rheumatoid "	10
Ankylosis	7
Dropsy of the Joints	4
Loose Cartilage	3
Relaxation of the Ligaments	
of a Joint	1
Knock-knee	3
Bow-leg	1
Flat-foot	60
Acquired	20
Foreign bodies	2
Hernia of Synovial Membrane,	5

Carried forward..... 2,802

Brought forward 2,802

Spine.

Caries and Necrosis of the	
Vertebrae	5
Psoas Abscess	5
Scoliosis	7

Muscles.

Muscular Rheumatism	1
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Tendons.

Teno-synovitis	27
Ganglion	29
Diffused Palmar Ganglion..	1
Contraction of Fasciæ	1
Rupture of Tendon	1
Tenotomy	1
Wry-neck	1
Dupuytren's Contraction	3
Hammer Toe	1

Bursæ.

Enlarged Bursa Patellæ	8
" " over Olecra-	
non	7
Enlarged Bursa over Sarto-	
rius	1
Bursitis	17
Bunion	6
Syphilis	2

*Injuries.**General Injuries.*

Sprains	82
Wounds	6
Contused	2
Poisoned	61
Burns	92
Electric wire	1
Scalds	2
Multiple injury	2
Contusions	5

*Local Injuries.**Of the Head.*

Contusion	11
Cephalæmatoma	1

Carried forward 3,191

Brought forward 3,191

Scalp wound: bone not exposed..... 156

Fracture of the Vault of the Skull:

Simple, without depression, 2

Compound, with depression, 1

Of the Face.

Contusion..... 37

Wound..... 158

Injuries of the Vessels of the

Face 2

Oedema 1

Powder-face 2

Fracture of the Facial Bones, 1

“ “ Nose..... 6

“ “ Nose, compound 2

Fracture of the Lower Jaw... 13

Injuries of the Teeth and Al-

veoli 2

Of the Eye.

Contusion..... 4

Foreign Bodies in the Cornea, 4

Foreign Bodies in the Cavity of

the Eye 3

Wound of Eyelids..... 1

Of the Neck.

Contusion..... 5

Wound of the Neck..... 5

Foreign Bodies in the Pharynx, 1

Of the Chest.

Contusion..... 75

Fracture of the Ribs or Costal

Cartilages without injury to

the lung 48

Fracture of the Ribs or Costal

Cartilages with injury to the

lung 1

Fracture of the Sternum.... 3

Wound of the Thoracic

Parietes 1

Carried forward 3,725

Brought forward 3,725

Of the Back.

Contusion..... 42

Sprain... .. 23

Wound 9

Fracture of the Spine..... 1

Carbuncle of Back 1

Abscess of Back..... 1

Of the Abdomen.

Contusion..... 3

Of the Pelvis.

Wound of the male Perineum,

Scrotum, and Penis 1

Fracture of Penis 1

Of the Upper Extremities.

Injuries 13

Contusion 285

Sprain 183

Wound..... 601

Injuries of Vessels..... 2

Foreign Bodies 16

Amputations..... 11

Laceration..... 2

Subluxation of Clavicle..... 1

Fracture of the Clavicle 53

“ “ Scapula . . . 3

“ “ Humerus 41

Fracture of the Humerus,

Comp. 2

Subluxation of Radius 3

Fracture of Radius..... 111

“ “ “ Comp. .. 4

“ “ Ulna..... 9

“ “ “ Comp. 1

“ “ Radius and Ulna, 18

Fracture of Radius and Ulna,

Comp. 2

Fracture of Olecranon 5

“ “ Elbow Joint 15

“ “ “ “ Com-

plicated 2

“ “ External Condyle, 3

“ “ Internal “ 3

Simple Fracture of Phalanx.. 9

Comp. “ “ .. 5

Carried forward 5,210

<i>Brought forward</i>	5,210
Fracture of Carpus.....	1
“ “ Metacarpus Comp.,	32
Ununited Fracture of Fore- arm.....	2
Dislocation of the Acromio- clavicular Joint.....	3
Dislocation of the Shoulder..	30
“ “ Elbow ...	9
Dislocation of the Elbow, Comp.	1
Dislocation of the Thumb	2
“ “ Phalanges..	1
“ “ Phalanges, Comp.	6
“ of Radius	1

Of the Lower Extremities.

Injuries	2
Contusion	131
Sprain	79
Wound.....	134
Separation of Epiphyses	1
Amputations	5
Bare Stump	2
Fracture of the Femur	6
“ “ Patella	5
“ “ Tibia.....	27
“ “ “ Comp... ..	7
“ “ Fibula.....	35
“ “ “ Comp.	3
“ “ Tibia and Fib- ula	45
“ “ Bones of the Foot	19
Dislocation of the Hip.....	1
“ “ Foot.....	2
“ “ Knee	1
“ “ Astragalus, Comp. ..	1

Not Classified.

Rupture of Muscles	1
Foreign substances in the Cel- lular Tissue	20

Carried forward 5,825

<i>Brought forward</i>	5,825
Poisoned wounds.....	10
Stinging Insects.....	1
By Animals having Infectious Diseases	1
Malignant Pustule	1

Congenital Malformations.

Fissure of the Palate	1
Congenital Dislocation of Hip, .	1
Supernumerary Fingers	1
Chicken Breast	2
Malingering	4
No Diagnosis	359
Axillary Abscess.....	20
“ Adenitis	7
Palmar Abscess.....	10
Obscure Injuries	34
Amputations... ..	18
Hobbed Toenail.....	1

Not Classified.

Deformity of Toes	1
Noma	1

Transfers.

Transferred :	
To Medical O.P. Dep't.....	116
“ Woman's “	13
“ Eye “	12
“ Ear “	11
“ Skin “	16
“ Nervous “	36
“ Throat “	25
“ Chardon-street Home ..	1
“ Children's Hospital	3
“ Superintendent :	
For Admission.....	183
“ Advice.....	19
“ Dental School.....	1
“ Other Institutions.....	30
Refused Treatment.....	32
Non-residents not treated	5
No Disease	2

Grand total..... 6,803

OUT-PATIENT DEPARTMENT.

DISEASES OF THE EYE.

IN CHARGE OF DRS. WADSWORTH AND DIXON.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Males.	Females.	Total.
CONJUNCTIVA.			
Conjunctivitis, catarrhal	118	160	278
“ phlyctenular	21	40	61
“ blennorrhœal	1	5	6
“ traumatic	12	8	20
Blennorrhœa neonatorum		2	2
Trachoma	15	7	22
Ecchymosis	2	1	3
Burns.....	3	1	4
Oedema	1	.....	1
Symblepharon		1	1
Pterygium.....	1	1	2
Foreign bodies.....	7	4	11
Hyperæmia	1	2	3
Conjunctivitis, specific.....	2	.....	2
“ follicular.....	1	2	3
“ purulent	2	1	3
“ granular		1	1
CORNEA AND SCLEROTICA.			
Keratitis	12	19	31
“ interstitial.....	4	5	9
<i>Carried forward</i>	203	260	463

DISEASES OF THE EYE. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	203	260	463
Keratitis, phlyctenular	24	48	72
“ fascicular	1	1	1
“ traumatic	4	1	5
Hypopion-keratitis	1	.....	1
Ulcer	26	19	45
Abscess	1	.....	1
Opacity	13	10	23
Adherent Leucoma	4	14	18
Conical Cornea . . . . .	.....	1	1
Pannus	3	4	7
Burns	3	.....	3
Wounds	7	3	10
Staphyloma	2	5	7
Sclero-keratitis . . . . .	.....	3	3
Episcleritis	1	1	2
Foreign Bodies	21	4	25
Cornea, great Irregularity of	1	.....	1
VITREOUS.			
Floating Opacities	1	5	6
Muscae Volitantes (physiological) . . . . .	.....	3	3
LENS.			
Cataract	15	7	22
“ senile	6	13	19
“ traumatic	3	1	4
“ lamellar	2	.....	2
“ congenital	2	.....	2
<i>Carried forward</i>	343	403	746

DISEASES OF THE EYE. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i> ..	343	403	746
Dislocation ..	2	1	3
GLOBE.			
Hydrophthalmos ..	1	1	2
Panophthalmitis.....		1	1
Foreign Body in the Globe ..	11	3	14
Disorganization from Injury.....	1		1
Ophthalmia Neonatorum.....		1	1
Atrophy ..		3	3
After Enucleation ..		2	2
Pain after La Grippe ..		1	1
Microphthalmos ..	1		1
REFRACTION AND ACCOMMODATION.			
Myopia.....	18	29	47
Hypermetropia.....	80	184	264
Astigmatism ..	22	61	83
Presbyopia ..	11	53	64
Asthenopia ..	5	18	23
Compound Hypermetropic Astig.		2	2
“ Myopic Astig.	1		1
LACHRYMAL APPARATUS.			
Blennorrhœa of Sac ..	8	6	14
Abscess of Sac ..	2	2	4
Stricture of Canaliculus ..		1	1
“ Nasal Duct.....		1	1
Lachrymal Catarrh.....	3	2	5
Dacryo-cystitis.....	3	2	5
Epiphora ..	1	1	2
<i>Carried forward</i>	513	778	1,291

DISEASES OF THE EYE. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	513	778	1,291
LIDS.			
Blepharitis	6	17	23
Hordeolum	3	9	12
Abscess	2	1	3
Epithelioma	1	.....	1
Chalazion	14	14	28
Entropion .....	.....	2	2
Ectropion.....	1	1	2
Trichiasis	4	3	7
Distichiasis.....	.....	1	1
Ecchymosis.....	2	.....	2
Oedema	1	5	6
Eczema	1	3	4
Xanthelasma.....	.....	1	1
Wounds.....	3	2	5
Burn.....	1	.....	1
Molluscum Contagiosum.....	.....	1	1
Blepharadenitis	1	.....	1
Sebaceous Cyst	1	.....	1
Polypus, Inner Canthus.....	1	.....	1
Exophthalmos (Goitre).....	.....	1	1
Caries.....	1	.....	1
Cellulitis	1	.....	1
NERVES AND MUSCLES.			
Convergent Strabismus	6	12	18
Paralysis of third pair	2	.....	2
“ “ sixth pair .....	.....	3	3
<i>Carried forward</i>	565	854	1,419

DISEASES OF THE EYE. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	565	854	1,419
Blepharospasm	1	3	4
Neuralgia of fifth pair	1	1	2
Esophoria		2	2
Hyperphoria		1	1
Orthophoria	1	1	2
Cocaine Paralysis of Accommodation		1	1
Diplopia	1	1	2
IRIS, CILIARY BODY, AND CHOROID.			
Iritis	10	8	18
“ traumatic		2	2
“ rheumatic	2		2
“ syphilitic	4	4	8
Posterior Synechiae		2	2
Occlusion of Pupil		2	2
Iridodonesis	1		1
Hyphaema	2		2
Irido-choroiditis	5	1	6
Cyclitis		1	1
Choroiditis	5	2	7
“ disseminata		1	1
Glaucoma	4	4	8
Iridoplusia	1	1	2
RETINA AND OPTIC NERVE.			
Retinitis	1		1
“ apoplectic	1		1
“ pigmentosa	1		1
“ Bright's		1	1
<i>Carried forward</i>	606	893	1,499

DISEASES OF THE EYE. — *Concluded.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	606	893	1,499
Separation of Retina	3	.....	3
Neuro-retinitis	1	.....	1
Neuritis .....	.....	1	1
Atrophy of Optic Nerve	5	2	7
Amblyopia	1	.....	1
“ ex abusu.....	5	.....	5
Scotoma	1	.....	1
Glioma .....	.....	1	1
Oedema of Disk	1	.....	1
MISCELLANEOUS.			
No disease	5	1	6
No diagnosis.....	26	31	57
No treatment	1	3	4
Refused treatment	2	2	4
Recommended for admission to Hospital.....	3	3	6
Referred to Eye and Ear Infirmary .....	.....	1	1
“ “ Surgical Department.....	3	1	4
“ “ Medical Department	1	1	2
“ “ Ear Department .....	.....	1	1
“ “ Throat Department	1	.....	1
“ “ Nervous Department	2	3	5
“ “ Elsewhere.....	2	2	4
Incised Wound of Nose .....	.....	1	1
Cephalalgia.....	.....	1	1
Grand totals	669	948	1,617

OUT-PATIENT DEPARTMENT.

DISEASES OF THE SKIN.

IN CHARGE OF DRS. WIGGLESWORTH AND TILDEN.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Males.	Females.	Total.
I. DISORDERS OF THE GLANDS.			
(a) <i>Of the Sweat Glands —</i>			
Hyperidrosis.....	4	1	5
Dysadrosis		1	1
(b) <i>Sebaceous Glands —</i>			
Sebaceous Cyst	2	.....	2
Seborrhœa.....	14	13	27
Comedo	1	4	5
II. INFLAMMATION.			
Exanthemata	2	2	4
Erythema Simplex	5	1	6
Urticaria	11	22	33
Dermatitis.....	7	5	12
“ calorica		2	2
“ traumatica.....	1	....	1
“ medicamentosa.....	1	1	2
“ venenata	8	2	10
Erysipelas.....	1	2	3
Furunculosis	4	4	8
Herpes Simplex.....	5	3	8
“ Zoster	3	3	6
<i>Carried forward.....</i>	69	66	135

DISEASES OF THE SKIN. — *Continued.*

DISEASES.	Males.	Females.	Totals.
<i>Brought forward</i>	69	66	135
Psoriasis	16	9	25
Pityriasis Maculata et Circinata.....		1	1
Lichen Planus	4	1	5
Eczema	107	114	221
Acne	20	48	68
“ rosacea		7	7
Impetigo	7	9	16
“ contagiosa	6	3	9
III. HÆMORRHAGES.			
Purpura Simplex.....	2	2	4
IV. HYPERTROPHIES.			
(a) <i>Of Pigment</i> —			
Chloasma.....	1	1	2
(b) <i>Of Epidermal and Papillary Layers</i> —			
Molluscum Contagiosum		1	1
Verruca	2	5	7
V. ATROPHIES.			
<i>Of Hair</i> —			
Alopecia	1	.....	1
“ furfuracea	1	.....	1
“ areata.	5	3	8
VI. NEW GROWTHS.			
(a) <i>Of Vessels</i> —			
Angioma	1	.....	1
Lupus erythematosus	2	1	3
“ vulgaris.....	1	2	3
Scrofuloderma	1	1	2
<i>Carried forward</i>	246	274	520

DISEASES OF THE SKIN. — *Concluded.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i> ..	246	274	520
Syphiloderma ..	30	20	50
Carcinoma ..	5	4	9
VII. NEUROSES.			
Pruritus.....	9	9	18
VIII. PARASITIC AFFECTIONS.			
(a) <i>Vegetable</i> —			
Tinea farosa ..	2	2	4
“ circinata.....	19	7	26
“ tonsurans..	19	.....	19
“ sycosis ..	5	.....	5
“ versicolor ..	4	.....	4
(b) <i>Animal</i> —			
Scabies ..	35	10	45
Pediculi capitalis ..	1	5	6
“ corporis.....	.....	2	2
UNCLASSIFIED.			
Ulcers ..	5	7	12
Adenitis ..	.....	2	2
Leucoderma ..	2	1	3
Elephantiasis ..	.....	1	1
Granuloma ..	.....	1	1
Pityriasis ..	1	1	2
Hordeolum ..	1	1	2
Rhagas.....	.....	1	1
Referred to Other Departments.....	3	.....	3
No Diagnosis ..	12	11	23
Total ..	399	359	758

OUT-PATIENT DEPARTMENT.

DISEASES OF THE NERVOUS SYSTEM.

IN CHARGE OF DRS. PRINCE, KNAPP, AND BULLARD.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Males.	Females.	Total.
I. DISEASES.			
<i>a. Motor Nerves —</i>			
Neuritis	5	1	6
Alcoholic neuritis	5	.....	5
Traumatic neuritis	4	2	6
Multiple neuritis	2	1	3
Brachial neuritis	2	1	3
Ulnar neuritis	1	2	3
Median neuretis	2	.....	2
Peroneal neuritis	1	.....	1
Musculo spiral paralysis	4	.....	4
Brachial paralysis	3	1	4
Traumatic paralysis .....	.....	2	2
Radial paralysis	7	.....	7
Deltoid paralysis	1	1	2
Crutch paralysis	2	.....	2
Peripheral paralysis	3	.....	3
Ulnar paralysis ...	1	.....	1
Diphtheritic paralysis	2	1	3
Facial paralysis .....	.....	3	3
Lead paralysis	1	.....	1
<i>Carried forward</i>	46	15	61

DISEASES OF THE NERVOUS SYSTEM. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	46	15	61
Infantile paralysis.....		1	1
Torticollis.....	1	1	2
Functional Apnoea		1	1
<i>b. Sensory Nerves —</i>			
Neuralgia.....	6	4	10
Cervico-occipital neuralgia.....		1	1
Facial neuralgia.....	5	2	7
Hemicrania		1	1
Cephalalgia.....	3	6	9
Sciatica	7	3	10
Paraesthesia		9	9
Hyperaesthesia.....	1		1
Popliteal neuralgia.....		1	1
Analgesia.....		1	1
Coccygodynia.....		1	1
II. VASO-MOTOR AND TROPHIC NEUROSES.			
Herpes zoster.....	1	1	2
Blue hands.....		1	1
III. SPINAL CORD.			
Spinal Meningitis.....	1		1
Anterior polio-myelitis.....	1	2	3
Myelitis	1		1
Tabes Dorsalis.....	3		3
IV. BRAIN AND BRAIN SUBSTANCE.			
Aphasia		1	1
General paralysis.....	2		2
Hemiplegia	4	1	5
<i>Carried forward</i>	82	53	135

DISEASES OF THE NERVOUS SYSTEM. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	82	53	135
Hemorrhage	3	.....	3
Embolus	1	1	2
Cerebral Infantile Paralysis	1	.....	1
Cerebral Monoplegia .....	.....	1	1
Cerebral Traumatic Lethelosis	1	.....	1
Cerebral Syphilis.....	2	.....	2
Cerebral Onoemia.....	1	.....	1
Cerebral Tumor.....	1	.....	1
Disseminated sclerosis.....	1	.....	1
V. PSYCHOSES.			
Hypochondriasis	6	4	10
Imbecility (congenital)	1	.....	1
Melancholia. ....	.....	4	4
Neuro-psychosis	1	.....	1
Folie du Doute	1	.....	1
Dementia	1	.....	1
“ paralytica	1	.....	1
Delusional Insanity .....	.....	1	1
VI. FUNCTIONAL NEUROSES AND UN- CLASSIFIED AFFECTIONS.			
Hysterical Paralysis.....	.....	1	1
Chorea	13	13	26
Hysteria.....	2	6	8
Epilepsy.....	11	6	17
Neurasthenia	7	32	39
Neurosis	3	3	6
Masturbation	1	.....	1
<i>Carried forward</i>	141	125	266

DISEASES OF THE NERVOUS SYSTEM. — *Continued.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	141	125	266
Blepharospasm	1	.....	1
Tremor	2	.....	2
Seminal Emissions	3	.....	3
Paralysis Agitans	5	.....	5
Electric Shock.....	1	.....	1
Vertigo	1	1	2
Spasm of Leg.....	.....	1	1
Spasm of Neck.....	1	1	2
Emesis Nocturnus... ..	.....	1	1
VII. DEFECTS OF DEVELOPMENT.			
Defective Cerebral Development	1	.....	1
VIII. POISONING.			
Lead	1	.....	1
Tobacco	5	.....	5
Tea .....	.....	1	1
Alcohol	2	1	3
IX. MISCELLANEOUS.			
Syphilis	4	2	6
Lumbago	7	1	8
Rheumatism	10	4	14
Rheumatoid Arthritis	1	1	2
Debility	4	10	14
Goitre.....	1	2	3
Muscular Strain.....	1	.....	1
Sprain, Ankle.....	1	.....	1
Sprain, Shoulder.....	1	1	2
Myxoedema	1	.....	1
<i>Carried forward</i>	195	152	347

DISEASES OF THE NERVOUS SYSTEM. — *Concluded.*

DISEASES.	Males.	Females.	Total.
<i>Brought forward</i>	195	152	347
Periarthritis.....	1	2	3
Fracture Acromion.....	1	...	1
Varicella .....	...	1	1
Pregnancy.....	...	1	1
Wound of Hand .....	...	1	1
Tuberculosis.	1	...	1
Head Injury	2	...	2
Mitral Disease ...	1	...	1
Floating Cartilage in Knee.....	1	...	1
Rhachitis	1	...	1
Parotiditis .....	...	1	1
Bursitis	1	...	1
Varicose Veins.....	...	1	1
Malaria	1	...	1
Bronchitis	1	...	1
Dislocated Shoulder.....	2	...	2
Cut Wrist	1	...	1
Enlarged Glands .....	...	1	1
Anæmia ...	...	5	5
Nervousness ..	...	1	1
Flat Foot.....	1	...	1
Dyspepsia	1	...	1
Not Treated	9	4	13
No Diagnosis	19	11	30
Referred to other Departments	30	17	47
Referred to other Hospitals.....	1	1	2
Total	270	199	469

OUT-PATIENT DEPARTMENT.

DISEASES OF THE THROAT.

IN CHARGE OF DRS. LELAND, DEBLOIS, AND FARLOW.

From February 1, 1892, to January 31, 1893, inclusive.

NOSE.

Epistaxis	4	<i>Brought forward</i>	634
Chronic Nasal and Pharyngeal		Spur on Septum	24
Catarrh	39	Ridge of Septum	4
Hypertrophic Catarrh and Nasal		Ulcer of Septum	3
Hypertrophies	123	Perforation of Septum	1
Atrophic Rhinitis	16	Acute Rhinitis	17
Purulent Rhinitis	11	Traumatic Rhinitis	1
Syphilitic Rhinitis	2	Necrosis of Nose and Ozæna ...	2
Syphilitic Caries of Nose	3	Ozena	2
Deflection of Septum	25	Synechia	2
Thickening of Septum	1	Nasal Mucous Polypus ..	12
Adenoids	57	Eczema	2
Foreign Body	4	Fracture of Nose	1

MOUTH, TONGUE, AND PHARYNX.

Acute Pharyngitis	29	Stomatitis	5
Chronic Pharyngitis	50	Specific Stomatitis	1
Syphilitic Pharyngitis	26	Syphilitic Oral Catarrh	1
Rheumatic Pharyngitis	3	Gingivitis	3
Hypertrophy of Base of Tongue,	11	Elongated Uvula	9
Acute Tonsillitis	65	Ulcer of Tongue	2
Acute Follicular Tonsillitis ...	14	Epithelioma of Tongue	1
Chronic Tonsillitis	41	Angioma of Tongue	1
Enlarged Luca's Tonsil	3	Injury to Tongue	1
Abscess of Tonsil	8	Cleft Palate	1
Hypertrophied Tonsils	11	Ranula	3
Chronic Peritonsillitis	1	Enlarged Glands of Neck	5
Carcinoma of Tonsil.	1	Enlarged Sublingual Glands ...	1
Œdema Glottidis	1		

LARYNX.

Laryngitis, sub acute	40	Perichondritis	4
" chronic	28	Oedema of Larynx	2
" tuberculous	14	Trauma " "	1
" syphilitic	3	Cancer " "	1
<hr/>		<hr/>	
<i>Carried forward</i>	634	<i>Carried forward</i>	747

<i>Brought forward</i>	747	<i>Brought forward</i>	809
Foreign Body in Throat	6	Papilloma of Vocal Cords....	3
Paralysis of Cord	1	Rhythmical Contraction of	
Fixation of Cord	1	Larynx.....	1
Relaxed Cord.....	2	Fracture of Cricoid Cartilage,	1
Post-diphtheritic Paralysis ...	1	Globus Hystericus	2
Recurrent Laryngeal " ...	2		

UNCLASSIFIED.

Bronchitis	3	Oedema of Palate	1
Diphtheria ..	6	Eustachian	1
Alcoholismus	1	Congestion of Tympanum....	1
Goitre.....	4	Verruca Labialis.....	1
Debility	4	Wisdom Tooth.....	1
Anæmia	6	Hæmophilia	1
Cervical Adenitis.....	11	Dyspepsia	1
Inflammation of Antrum of		Hay Fever	3
Highmore	1	Asthma	1
Retro-pharyngeal Abscess....	1	Parotiditis.....	1
Alveolar Abscess.....	2	Neurosis	2
Peri-tonsillar Abscess	2	Specific	3
Aphonia	5	Nothing found or referred to	
Mitral Disease.....	1	other Departments	52
Stricture of Oesophagus	2		
<i>Carried forward</i>	809	Total	885

OUT-PATIENT DEPARTMENT.

DISEASES OF THE EAR.

IN CHARGE OF DRS. LELAND AND SPEAR.

From February 1, 1892, to January 31, 1893, inclusive.

DISEASES.	Right.	Left.	Both.
AURIS EXTERNÆ.			
<i>Auriculæ.</i>			
Inflammationes.			
Abscess.....		1	
Eczema papulosum.....	2	2	3
<i>Meatus-Cutis.</i>			
Anomaliæ secretionum.			
Accumulatio ceruminis	16	15	22
Inflammationes.			
Otitis externa disquamativa	3	1	4
“ “ diffusa acuta.....	1	2	
“ “ “ chronica.....	1	2	
AURIS MEDIÆ.			
<i>Membranæ Tympani.</i>			
Myringitis acuta	3	2	
Inflammationes.			
Otitis catarrhalis secernens	2	2	4
“ “ “ mucosa acuta ..	1	2	4
“ “ “ “ chronica,	6	3	17
“ “ “ serosa acuta....	3	1	
“ “ “ “ chronica .	6	5	7
“ “ adhæsiva	3	3	7
<i>Carried forward.....</i>	47	41	68

DISEASES OF THE EAR. — *Concluded.*

DISEASES.	Right.	Left.	Both.
<i>Brought forward</i>	47	41	68
Otitis catarrhalis adhæsiva ex secernente.. .	5	4	
“ “ “ insidiosa	14	5	15
“ media acuta simplex.....	28	12	12
“ “ suppurativa acuta.....	15	11	13
“ “ “ cum perforatione .	8	7	5
“ “ “ chronica	7	5	6
“ “ cum cariae mastoidæ.....	1		
“ “ “ polypo.....	3	1	
Effectus otitis mediæ suppurativæ.....	14	5	2
“ “ “ cum perforatione.....	8	3	6
“ “ “ “ “ con- } glutinata }	4	1	3
Surditas senilis		1	1
“ vaso-motori			1
MORBUS LABYRINTHI ET ACUSTICI.			
Morbus Acustici			2
MORBI NARIUM ET NASO-PHARYNGIS.			
Hyperplasia tonsillæ pharyngis	4		3
UNCLASSIFIED.			
Foreign body	1		
Refused treatment.....			6
Unrecorded... ..			31
Unfit.....			15
Other diseases			14
Referred to other departments.....			13
Total	159	96	216

Total.....471

Males.....235

Females... ..236

OUT-PATIENT DEPARTMENT.

DISEASES OF WOMEN.

IN CHARGE OF DR. CHARLES M. GREEN.

For the Year February 1, 1892, to January 31, 1893, inclusive.

<i>Diseases of the Vulva.</i>		<i>Brought forward</i>	169
Abscess of Bartholini's gland...	1	Anteflexion of cervix and	
Cyst of labium majus	1	corpus	6
Oedema of labia	1	Anteversio.....	2
Pruritus.....	1	Latero-version	3
Vulvitis	1	Prolapse	30
		“ complete.....	3
		Retrocession.....	3
		Retroversion.....	51
		“ and retroflexion,	5
<i>Diseases of the Vagina.</i>		<i>Diseases of the Uterine Appendages.</i>	
Atresia	1	Ovarian cyst.....	1
Laceration from coitus.....	1	Ovaritis	2
Prolapse of anterior wall	2	Pelvic abscess	1
“ “ posterior “	1	Pelvic peritonitis.....	8
Vaginitis (gonorrhoeal).....	5	Prolapse of the ovary	3
“ (senile)	3	Salpingitis.. ..	6
“ (simple).....	11	Tubo-ovarian disease	1
<i>Diseases of the Uterus.</i>		<i>Functional Diseases.</i>	
a. Developmental:		Amenorrhoea	6
Hypertrophy of cervix...	1	Constipation	7
Infantile cervix.....	1	Dysmenorrhoea	1
Infantile uterus.....	1	Excessive coitus	1
Pin-hole os	2	Menopause	3
b. Inflammatory:		Menorrhagia	3
Atresia of cervix.....	1	Metrorrhagia	4
Cervicitis.....	18		
Endocervicitis	6	<i>Diseases of Bladder and Urethra.</i>	
Endometritis.....	5	Caruncle of meatus urethrae...	2
c. New growths:		Cystitis	2
Epithelioma cervicis.....	7	Cystocele.....	5
Fibro-myoma (interstitial),	1	Irritable bladder	11
“ (sub-mucous),	2		
“ (sub-serous),	10	<i>Unclassified.</i>	
d. Subinvolution	2	Abortion.....	4
e. Laceration of the cervix .	59	Anaemia.....	4
f. Displacements:			
Anteflexion of the cervix	22		
“ “ “ corpus	2		
<i>Carried forward.....</i>	169	<i>Carried forward.....</i>	347

<i>Brought forward</i>	347
Carcinoma of the omentum.	1
Chancroid	4
Debility	9
Dyspepsia	3
Enlarged inguinal gland	1
Extra-uterine pregnancy.	1
Hydatidiform mole	1
Inguinal hernia	1
Neurasthenia	3
Pregnancy... ..	61
Rectocele	1
Rheumatism	5
Rupture of perineum.....	20
“ “ “ (complete),	1
Sterility.....	3
	—
<i>Carried forward</i>	462

<i>Brought forward</i>	462
Syphilis	8
Thrombosis	1
Tumor of breast.....	1
Diagnosis undetermined	10
Examination refused.....	4
No lesion found	29
Referred from House (for obser- vation).... ..	2
Referred to Medical Department,	7
“ “ Skin “	7
	—
Lesions and conditions observed,	531
Deduct for patients counted	
more than once.....	58
	—
Total	473

BEQUESTS.

GOODNOW FUND. — ELISHA GOODNOW, of South Boston, who died in the year 1851, bequeathed to the city "all the rest and residue of my estate, real and personal, not otherwise disposed of," for the purpose of establishing, in the Eleventh or Twelfth Wards of the city, a hospital for the sick; one-half of said funds to be applied for the establishment and maintenance of free beds, which should always be at the disposal and under the control of the officers of the government of said hospital for the time being. Under this will the city came into possession of \$26,000 for the support of free beds.

NICHOLS FUND. — LAWRENCE NICHOLS, who died in September, 1862, made a bequest to the city of the sum of \$2,000 for "the establishment and endowment of a city hospital."

NORCROSS FUND. — 1868, January 1. The Trustees received the sum of two thousand dollars from Hon. OTIS NORCROSS, as the foundation of a fund for the benefit of patients leaving the Hospital poor and destitute of proper clothing.

Balance on hand, Feb. 1, 1892	.	.	.	\$243	85
Received interest	.	.	.	100	00
					<hr/>
					\$343 85
					<hr/>
Balance, Jan. 31, 1893	.	.	.	\$343	85
					<hr/>

BALL FUND. — 1870, April 1. The Trustees received from the estate of Mr. JONAS BALL the sum of one thousand dollars for the same purpose, and under the same restrictions, as the Norcross Fund.

Balance on hand, Feb. 1, 1892	\$63 78
Received interest	40 00
	<hr/>
	\$103 78
Expended	54 10
	<hr/>
Balance, Jan. 31, 1893	<u>\$49 68</u>

GOODNOW LIBRARY FUND. — 1874. Donation of GEORGE GOODNOW, the interest of which to be expended annually by this Board of Trustees in replenishing the library of the Hospital with books and pamphlets suitable for the reading of the patients during convalescence.

Balance on hand, Feb. 1, 1892	\$744 11
Received interest	60 00
	<hr/>
	\$804 11
	<hr/>
Balance, Jan. 31, 1893	<u>\$804 11</u>

SHAW FUND. — 1875. Bequest of the late MARY LOUISA SHAW, the income of which to be expended by the Trustees for the purchase of flowers and fruit, for the use and comfort of the patients in the Hospital.

Balance on hand, Feb. 1, 1892	\$326 26
Received interest	120 00
	<hr/>
	\$446 26
Expended	46 00
	<hr/>
Balance, Jan. 31, 1893	<u>\$400 26</u>

PERKINS FUND. — 1889. Bequest of the late MARY G. PERKINS, the income of which is to be expended for books for a medical library at the Hospital, and for the purchase of artificial limbs and surgical appliances for the use and relief of patients leaving the Hospital.

Balance on hand Feb. 1, 1892	\$166 88
Received interest	300 00
	<hr/>
	\$466 88
Expended	241 78
	<hr/>
Balance, Jan. 31, 1893	<u>\$225 10</u>

CHEEVER FUND. — 1889. Gift of Dr. DAVID W. CHEEVER, senior visiting surgeon, the income of which is to be semi-annually expended by the Trustees, to purchase and present each house surgeon, when his service expires, a pocket case of surgical instruments, as a gift from Dr. DAVID W. CHEEVER.

Balance on hand, Feb. 1, 1892	\$21 11
Received interest	80 00
	<hr/>
	\$101 11
Expended	80 00
	<hr/>
Balance, Jan. 31, 1893	<u>\$21 11</u>

RECAPITULATION CITY HOSPITAL TRUST FUNDS.

<i>Goodnow Fund.</i> — Two certificates city of Boston six per cent. stock for \$17,500, one of five per cent. stock for \$4,000, and one of four per cent. stock for \$4,500	\$26,000
<i>Nichols Fund.</i> — Two certificates city of Boston six per cent. stock	2,000
<i>Norcross Fund.</i> — One certificate city of Boston five per cent. stock	2,000
<i>Ball Fund.</i> — One certificate city of Boston four per cent. stock	1,000
<i>Goodnow Library Fund.</i> — One certificate city of Boston six per cent. stock	1,000
<i>Shaw Fund.</i> — One certificate city of Boston six per cent. stock	2,000

<i>Perkins Fund.</i> — One certificate city of Boston	
four per cent. bonds	\$7,500
<i>Cheever Fund.</i> — One certificate city of Boston	
four per cent. bonds	2,000
	<hr/>
	\$43,500
	<hr/>

The "Act to incorporate the Trustees of the City Hospitals of the City of Boston" (see Acts and Resolves, 1880, Chap. 174, approved April 7) provides that "money received by it shall be invested by the Treasurer of the city of Boston under the direction of the Finance Committee of said city : and all securities belonging to said corporation shall be placed in the custody of said Treasurer ; provided always, that both the principal and income thereof shall be appropriated according to the terms of the donation, devise, or bequest, under the direction of said corporations."

APPROPRIATIONS.

The following are the appropriations passed by the City Council, from July 2, 1861, to Feb. 1, 1893.

BUILDINGS AND GROUNDS :

Loan, Order of July 2, 1861,	\$100,000 00
Loan, Order of Dec. 27, 1861,	50,000 00
Loan, Order of July 23, 1862,	50,000 00
Loan, Order of Mar. 28, 1863,	50,000 00
Trans., Order of Oct. 23, 1863,	10,000 00
Loan, Order of Feb. 16, 1864,	60,000 00
Loan, Order of Nov. 15, 1864,	30,000 00
Loan, Order of June 7, 1865,	59,000 00
	\$409,000 00

LODGE :

Transfer, 1867	17,200 00
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WATER TANKS :

Transfer, Order of April 30, 1872	5,000 00
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ADDITIONS TO CITY HOSPITAL :

Appropriation, May, 1874	190,000 00
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DORMITORY FOR NURSES :

Appropriation, May, 1884	\$40,000 00
Transfer, Nov., 1885	5,600 00
	45,600 00

DORMITORY FOR NURSES, FURNISHING :

Appropriation, May, 1885	\$5,000 00
Transfer, Jan., 1886	737 68
	5,737 68

<i>Carried forward,</i>	\$672,537 68
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Brought forward, \$672,537 68

BUILDING FOR CONTAGIOUS CASES :

Appropriation, May, 1885 .	\$40,000 00	
Loan, Order of July 8, 1886 -	15,000 00	
Appropriation, May, 1887 .	5,000 00	
Loan, Order of Feb. 16, 1889,	6,156 01	
Transfer, April, 1889 . .	1,105 77	
	<hr/>	67,261 78

BUILDING FOR CONTAGIOUS CASES, FURNISHING :

Appropriation, May, 1887 . . .	7,375 00
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BUILDING FOR OUT PATIENTS :

Appropriation, May, 1886 .	\$10,000 00	
Loan, Order of July 8, 1886	9,000 00	
Appropriation, May, 1888 .	16,000 00	
Loan, Order of Feb. 16, 1889,	14,000 00	
Transfer, Mar., 1890 . .	1,800 00	
	<hr/>	50,800 00

HOME FOR CONVALESCENTS :

Loan, Order of Mar. 10, 1890 . . .	30,000 00
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HOME FOR CONVALESCENTS, FURNISHING :

Loan, Order of Oct. 17, 1890 . . .	20,000 00
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ANNEX TO CITY HOSPITAL :

Loan, Order of Mar. 10, 1890 . . .	17,500 00
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BUILDING FOR OUT PATIENTS, FURNISHING :

Transfer, Nov., 1889	8,950 00
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NEW BUILDINGS, CITY HOSPITAL :

Loan, Order of Jan. 2, 1892 .	\$136,500 00	
Loan, Order of May 24, 1892	135,000 00	
	<hr/>	271,500 00

ADDITIONAL LAND :

Loan, Order of Oct. 7, 1892 . . .	42,000 00
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Total	<hr/> <hr/> \$1,187,924 46
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HOUSE RULES.

WITH RULES FOR ADMISSION, DISCHARGES, AND GOVERNMENT OF PATIENTS; ALSO RULES FOR VISITORS.

HOUSE RULES.

All employés shall be in their respective places during the hours of duty.

The doors and gates of the Hospital will be closed at 10 o'clock P.M., at which time all inmates shall be quiet, and all not on duty shall be in their rooms.

A record shall be kept of all persons entering the Hospital between the hours of 10 P.M. and 7.30 A.M.

No employés shall be absent from the Hospital, except as permitted by special rules or by the Superintendent.

The use of tobacco, wine, and intoxicating liquors is prohibited within the Hospital, unless prescribed by a physician or surgeon.

All profane and obscene language, loud talking, and incivility are prohibited.

All employés shall observe such further rules and directions for their conduct as may from time to time be established.

ADMISSION OF PATIENTS.

Applications for admission of patients may be made at the Hospital on each day of the week, Sunday excepted, between 9 and 12 o'clock A.M.

Whenever able, the patient shall apply in person. When not able to apply in person, on application made by a friend the patient may be visited at his residence.

Any Trustee, or either of the physicians or surgeons in attendance, may, in case of emergency, send a patient in the first instance to the Hospital by written permit.

Persons accidentally wounded, or otherwise disabled or injured, shall be received at all hours.

Permits for admission shall be subject to the approval of the Visiting Committee, and the committee shall, except as above, have power at any time to require the Superintendent to report to them the names of applicants before admitting them, and may dismiss any patient whom they think improperly admitted, or change the terms of admission.

Patients may be admitted by the Trustees to the privileges of the Hospital at such rates of board as the Trustees may, from time to time, determine, payment for such board being secured by the friends of the patients or by the authorities of the city or town to which the patients belong.

Whenever, in the opinion of the Trustees, the circumstances of the patient will warrant it, the whole or part of the board shall be paid. If separate apartments or articles not usually furnished at the Hospital are provided, such payment shall be made therefor as the Trustees shall deem reasonable.

No person having acute venereal disease or alcoholism shall be admitted except as a paying patient.

No person shall be admitted to the Hospital whose case is judged to be incurable, unless there be urgent symptoms which are deemed capable of being relieved.

DISCHARGE OF PATIENTS.

Patients shall be discharged by the Superintendent as before provided.

Patients discharged on the recommendation of the physicians or surgeons shall be provided with a certificate, stating their condition at the time of discharge, whether cured, relieved, or not relieved, which certificate shall be signed by the Superintendent.

Whenever a patient is removed from the Hospital without the approval of the Superintendent, a written statement to that effect shall be required from any person assuming the responsibility of the removal.

In case of the decease of a patient the Superintendent shall sign the death certificate. He shall also state the time and cause of death, the disposition made of the body, whether

delivered to friends or buried from the Hospital, in which latter case he shall mention the place of interment.

The body of any person dying at the Hospital shall not be delivered without a written receipt from the parties taking the same.

GOVERNMENT OF PATIENTS.

Patients shall implicitly observe all the rules of the Hospital.

Patients shall be in their proper places in the wards during the visits of the physicians and surgeons, between 2 and 3 o'clock on visiting days, and always by 7.30 o'clock P.M., unless specially excused by the Superintendent.

Such free patients as are able shall assist in nursing, and in such other services as may be reasonably required of them.

No patient shall leave the Hospital grounds without a pass from the Superintendent, nor his ward without the consent of the nurse in charge.

No patient shall purchase, or cause to be purchased for him, any article of food whatsoever, nor any other article, without the consent of the Superintendent.

Profane and obscene language, loud talking, and incivility are prohibited.

Patients may be visited by clergymen of their own selection, and any wish for the performance of any particular religious rite shall be indulged when practicable.

Complaints, for whatever cause, may be made to the Superintendent or Visiting Committee, and when reasonable shall be by them reported to the Trustees.

VISITORS.

No person shall visit any part of the premises, except on business, or at such time as may be fixed for the reception of visitors, without the permission of the Superintendent, or of some one of the Trustees.

On Monday, Tuesday, Thursday, and Saturday of each week, from 2 to 3 o'clock P.M., friends may be permitted to visit patients, though no patient shall receive more than

two visitors on the same day. In all cases, however, the Trustees or Superintendent may exercise discretionary powers as to excluding or admitting visitors.

Patients who are considered dangerously ill are permitted to see friends in reasonable numbers, and at reasonable hours during the day, but friends visiting such patients should not remain later than 8 o'clock P.M., and are not permitted to remain all night unless it seems probable that such patients will not live through the night.

All visitors shall leave the Hospital when the bell rings at the expiration of the visiting hour.

No visitor shall take any meal in the Hospital, or pass the night therein, without permission from the Superintendent or one of the Trustees.

No visitor shall be allowed to give any article of food or drink to a patient, unless by permission of the nurse; and any article sent to a patient shall be left with the Superintendent.

RULES OF THE CONVALESCENT HOME.

The department of The Boston City Hospital located at No. 2150 Dorchester avenue, near Milton Lower Mills in Dorchester, shall be known as the Convalescent Home, and shall receive such *patients recovering from acute diseases as shall be transferred to it from the main Hospital for treatment during convalescence.*

The Superintendent of the Hospital shall, under the direction of the Trustees, have the control and management of the Convalescent Home, in the same manner as of other departments of the Hospital.

The Superintendent shall appoint, subject to the approval of the Trustees, a Matron, and shall employ, under their direction, such further assistants as may be necessary for the proper conduct and service of the Home.

The Matron, under the direction of the Superintendent, shall have the immediate charge of the Home, and the control of all nurses and other employés and patients. She shall reside at the Home.

ADMISSION AND DISCHARGE OF PATIENTS.

Patients shall be transferred from the Hospital to the Convalescent Home by the Superintendent, subject to the direction of the Trustees, on recommendation of the Visiting Staff or otherwise; and the Superintendent shall keep a record of all patients so transferred. When patients are so transferred they shall be considered as discharged from the Hospital. Payment of their board shall be required, the same as of patients at the Hospital, but separate apartments shall not be furnished at the Home. No person whose case is judged to be incurable shall be admitted to the Home.

Patients shall not be allowed to remain at the Home for a longer period than two weeks, except on recommendation of

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the physicians, or for special cause approved in writing by the Superintendent. All patients remaining beyond the period of four weeks shall be forthwith reported to the Visiting Committee, and to the Trustees at their subsequent regular meeting.

Patients when discharged shall be provided with a certificate, stating the date of admission and discharge, and their condition when leaving the Home.

GOVERNMENT OF PATIENTS.

Patients shall implicitly observe all rules established for the government of the Home.

Patients shall rise at 7 o'clock in winter, and at 6.30 in the summer. Breakfast shall be served at 7.30 o'clock in the winter, and at 7 o'clock in the summer; dinner at 12 o'clock, and supper at 5.30 o'clock. Patients shall retire at 8 o'clock during the winter, and at 8.30 o'clock during the summer, and shall be quiet during night hours.

Such patients as are, in the opinion of the Matron, able, shall assist in light domestic work, and perform such other services as may be reasonably required of them, subject to the approval of the Superintendent or physicians.

No patient shall leave the house without permission, nor shall depart from the grounds of the Home without a pass from the Matron.

No patients shall purchase, or cause to be purchased for themselves, any article of food whatsoever, nor any other article, without the consent of the Superintendent or Matron.

Patients shall not talk to one another of their ailments.

Improper language, loud talking, and incivility are prohibited.

Patients may be visited by clergymen of their own selection, and any wish for the performance of a particular religious rite shall be indulged when practicable.

Complaints, from whatever cause, may be made to the Matron, the Superintendent, or Visiting Committee, and if of sufficient importance shall be reported to the Trustees.

VISITORS.

Friends may be permitted to visit patients on week-days, between three and four o'clock in the afternoon. In all cases the Trustees, Superintendent, and Matron may exercise discretionary powers as to excluding or admitting visitors.

Visitors shall leave the Home and grounds at the expiration of the visiting hour, and shall visit no part of the Home or grounds other than the reception-room, except by permission from the proper authority.

No person shall give any article of food or drink to a patient, unless by permission of the Matron.

THE BOSTON CITY HOSPITAL.

TRAINING SCHOOL FOR NURSES.

THE Trustees of The Boston City Hospital, in 1878, established a Training School for Nurses, in order to give to women desirous of becoming professional nurses a systematic course of training and practice.

The Training School is controlled by the Trustees of the Hospital, like all other departments of the Hospital service. The Superintendent of the Hospital has the general supervision of all matters relating to the school, its course of work and study, lectures, and discipline. The Superintendent of Nurses has the immediate charge of all the nursing in the Hospital, of all persons employed in the wards, and also the instruction and management of the nurses in the Training School. All female nurses in the Hospital must be connected with the school.

The course requires two years, and includes general medical and surgical nursing, together with ophthalmic, aural, and gynæcological nursing, and also the nursing of contagious diseases. Maternity nursing is theoretically taught, but there are no maternity wards connected with the Hospital. Those wishing to receive such a course of instruction should apply to the Superintendent of The Boston City Hospital.

The most desirable age for candidates is from twenty-three to thirty-five years. They must be of sound health, and should send with their application a certificate from a physician, certifying to the fact. They should also send a brief personal history, and give the names and addresses of three responsible persons not of their own kin who know of their

good character and capabilities. Upon the recommendation of the Superintendent and the approval of the Trustees, they will be received for two months on probation. The fitness of candidates for the training and work, and the propriety of retaining or dismissing them, will be determined by the authorities in charge of the school, under the direction of the Trustees.

At the end of the first month, candidates, if considered satisfactory, are permitted to wear the cap and enter upon the regular course of training, but such candidates are not permitted to join the school formally until the end of the second month, when, if accepted, they sign an agreement to complete the prescribed course of two years, and to conform to all rules. At the end of the first six months the record and work of each pupil are carefully scrutinized as to her fitness to make a good nurse, and the right is reserved by the authorities of the Hospital to terminate then, or any time, the connection of any pupil or nurse with the school, for inefficiency, misconduct, generally unsatisfactory record, or for any other reason which may be deemed sufficient.

During the first two months pupils are called Probationers, for the remainder of the first year, Junior Nurses, and during the second year, Senior Nurses. Nurses who remain in the Hospital after graduation become Head Nurses.

The nurses in the Training School (including Probationers) reside at the two Nurses' Homes connected with the Hospital, which have rooms for ninety nurses. The houses afford home-like surroundings, and have the best of conditions necessary to good health and personal hygiene.

The Superintendent of Nurses has the immediate charge of the Training School, under the authority of the Superintendent of the Hospital and of the Trustees, and the nurses are subject to the rules of the Hospital, like any other service.

The instruction includes the general care of the sick, the making of beds, changing bed and body linen, managing of helpless patients in bed, etc.; giving baths, keeping patients warm or cool, prevention and dressing of bed-sores, and proper management of the patient under various condi-

tions, with different diseases or injuries; the making and applying of bandages and rollers, preparation of splints, application and management of surgical apparatus, applying of fomentations and poultices, the dressing of burns, ulcers, and wounds, and other minor dressings, cupping, leeching, and subsequent treatment, the administering of enemata, and use of the female catheter.

Nurses are taught how to act in the various emergencies occurring in hospital and private nursing, as well as in the accidents of ordinary life. They are also given lessons in *massage* by a professional instructor. There is a systematic course of training in cookery for the sick, the serving of food and delicacies in the proper manner, and the feeding of helpless patients, or those who resist food.

Instruction is also given in the best practical methods of supplying fresh air, of warming and ventilating sick-rooms in a proper manner, and the proper care of sick-rooms for the best good and comfort of the patient; in keeping all utensils and appliances perfectly clean and disinfected; in making accurate observations of the pulse, temperature, respiration, expectorations, the secretions, state of the skin, and eruptions; of mental condition as to delirium, stupor, shock, etc.; of the condition as to sleep, appetite, effects of diet or of stimulants and medicines; the behavior of wounds and the after-treatment in surgical operations; and in the managing of convalescents. Nurses are taught the administering of medicines and the application of external remedies, how to take notes on cases, the making up of the nurse's record, and the reports to the attending doctor.

The course of training includes a fixed course of instruction during the two years from manuals and text-books, mainly given by the Superintendent of Nurses, the Assistant Superintendent of Nurses, and graduate head nurses. Lectures and demonstrations, chiefly upon practical points, are given at stated times by the medical and surgical staff of the Hospital. While the instruction by the manuals, text-books, lectures, demonstrations, quizzes, and models is considerable, the main reliance is upon accurate daily drill in the

wards, operating rooms, and other departments of the Hospital. Examinations, both written and oral, are held from time to time by the authorities of the school and by the Hospital staff, and nurses cannot pass to graduation unless attaining, on critical marking, at least seventy per cent.

The pupils are employed as assistant nurses in the wards, operating rooms, and out-patient departments of the Hospital. They are given six months' training in medical wards, and six months' in surgical wards; the remainder of the time to be in such wards or departments as the management may appoint.

Probationers are not paid during their first month, but for the remaining months of the junior year they receive ten dollars (\$10) per month, and for the senior year, fourteen dollars (\$14) per month, to pay for the expenses of their uniform, personal clothing, and other minor requirements. This sum is in no wise intended as wages, it being considered that their education during this time is a full equivalent for their services. When the full term of two years is completed the nurses receive, if they pass all the examinations and are otherwise satisfactory, a diploma certifying to the regular course of training and practice, and are then permitted to wear the graduates' badge of the school.

The majority of graduates engage in private nursing, but some are invited to remain in the service of the Hospital as head nurses, and receive twenty dollars (\$20), twenty-five dollars (\$25), thirty dollars (\$30), thirty-five dollars (\$35), per month, with opportunities of promotion. Graduate head nurses who prefer to remain in Hospital work, or return after a term of private nursing, are given post-graduate instructions in ward management, hospital housekeeping, and minor administration.

The school year has no fixed date, but accepted candidates may enter whenever vacancies occur. They are, as a rule, received in the order of acceptance, but those desiring to enter with less delay can generally anticipate a fixed date by placing themselves on the emergency list. When coming

to the Hospital they should bring with them the following articles: Three gingham or calico dresses, made plainly; eight large white aprons, made of bleached cotton, with bibs, plain at the top and gathered slightly at the bottom, two buttons on the band, with hem at bottom four inches in depth; two bags for soiled clothes; one pair of scissors, a pin ball, and a napkin-ring; a good supply of plain under-clothing—every article to be distinctly marked with indelible ink, with the owner's name. Twenty-one pieces are allowed for the laundry each week.

Nurses must bring suitable outer-garments for stormy weather, and they are required to wear noiseless broad-toed and flat-heeled boots. If the teeth are out of order in any way, they must receive attention before coming for the probationary month. Nurses are required to wear the Training School uniform after they join the school. Material for dresses will be sold at cost price; caps are furnished free of charge.

Hours of duty for day nurses are from 7 A.M. to 8 P.M.; for night nurses from 8 P.M. to 7 A.M. No nurse is required to do both day and night duty on the same day, except in rare emergencies. Each nurse on day duty is allowed one hour after 2 o'clock P.M., for rest and recreation, one-half day after 2 P.M. each week, and four hours on Sunday. Two weeks' vacation is allowed each year. If nurses are sick they are cared for in the Hospital, but wages are stopped. Nurses on night duty are required to be in bed until 4 P.M. Nurses may be called upon for four months' regular night duty during the two years' training; besides "special cases" to a limited number.

COURSE OF INSTRUCTION.

JUNIOR YEAR.

Manual of Hospital Nurses (1) *Domville.*
 Manual of Medical and Surgical Nursing (2) *Cullingworth.*
 Lectures on Fever Nursing (3) *Wilson.*
 Notes on Surgery for Nurses *Bell.*
 Handbook of Obstetrical Nursing *Fullerton.*
 Glossaries, tables, technicals, etc. *Various.*
 A lecture once a week (for thirty-four weeks) by a member of the Medical and Surgical Staff.

Critical Reviews on the lectures given by the Medical and Surgical Staff.

Instruction in the Wards by Head Nurses and Senior Nurses.

SENIOR YEAR.

Handbook for Hospitals (1) *Woolsey.*
 Physiology, Anatomy, and Hygiene [complete] (2) *Hutchinson.*
 General Anatomy, including instruction from Charts, Models, and the Skeleton.

Elementary Materia Medica *Various.*

A lecture once a week [for thirty-four weeks] by a member of the Medical and Surgical Staff.

Practical Instruction in *Massage*. [Twelve lessons.]

Practical Instruction in Cooking for the Sick. [Six lessons.]

Instruction in the Wards by Assistant Superintendent of Nurses, Night Superintendent of Nurses, and Head Nurses.

Instruction and drill in the etherizing, operating, and recovery rooms by the Assistant Superintendent of the Hospital, the Surgeons, and Operating-room Nurse.

Collateral Reading.

(1) Medical Nursing *Anderson.*
 (2) Lectures on Nursing *Lückes.*
 (3) Notes on Hospital Nursing *Florence Nightingale.*

DISTRIBUTION OF STUDIES.

Monday,	2 to 4 P.M.	Senior Nurses, Cooking Class.
	3 P.M.	Senior Nurses [section], <i>Massage</i> .
	8 P.M.	Head Nurses; hospital administration, ward management, minor executive work, training of Assistant Nurses.
Tuesday,	11 A.M.	Senior Nurses [section], Operating-room.
	2 P.M.	Junior Nurses [5th class], Recitation.
	3 P.M.	Senior Nurses [section], <i>Massage</i> .
	3.30 P.M.	Junior Nurses [3d class], Recitation.
Wednes.,	2 P.M.	Senior Nurses [1st class, 2d Div.], Recitation.
	3 P.M.	Senior Nurses [section], <i>Massage</i> .
Thursday,	3.30 P.M.	Junior Nurses [4th class], Recitation.
Friday,	11 A.M.	Senior Nurses [section], in Operating-room.
	2 P.M.	Senior Nurses [1st class, 1st Div.], Recitation.
	3 P.M.	Senior Nurses [2d class], Recitation.
	4 P.M.	Lecture to School in Operating Amphitheatre by a member of the Medical and Surgical Staff.
Saturday,	3 P.M.	Senior Nurses [section], <i>Massage</i> .

LIST OF LECTURES AND SUBJECTS.

A lecture is given to the Training School on Fridays, at 4 P.M., in the Operating Amphitheatre, by a member of the Medical and Surgical Staff, once a week between September 15 and June 15. The following are among the lectures given :

Five. — Surgical Dressings: poultices, washes, fomentations, bandaging, splints, leeches and blisters, enemas, surgical hæmorrhage, etc.

Three. — Theory of Wounds: modes of healing, granulations, ulcers, cellulitis, suppuration, sloughs, erysipelas, pyæmia, gangrene, sepsis, etc.

Three. — Bacteriology, brief history and general theory: micro-organisms; general distribution in air, water, etc. Elementary consideration of pathogenic and non-pathogenic micro-organisms. Exhibition of apparatus and cultures. Practical points for nurses.

Two. — Theory of Sepsis: aseptic treatment, different methods; dressings, with demonstrations and “quiz-drill.”

Two. — Emergencies: hæmorrhage, burns, heat-stroke, fits or seizures, drowning, fractures, immediate treatment of wounds and injuries, foreign bodies in eye, nose, and ear, poisons, domestic emergencies, and practice of expedients.

Two. — Surgical anatomy and landmarks, hæmorrhages, etc.

One. — Surgical Operations: care of patient before, during, and after operations; anæsthesia and recovery; accidents, hæmorrhage, shock, especially as in private nursing.

One. — Abdominal Surgery: including ovariectomy, herniotomy, operations for abdominal injuries, etc.

One. — Fractures: varieties, preparation and care of splints and apparatus for treatment, management of cases, etc.

Three. — Medicines: avenues of taking; preparation and doses; classes of internal and external poisons; cautions; hospital formulæ.

One. — Nursing in Fevers: theory of fever, symptoms and course of, different plans of treatment, nurses' duties as to symptoms, bed, clothing, secretions, baths, food, and management of cases.

Two. — Eruptive fevers, especially diphtheria and scarlet fever; symptoms and course of disease; complications; infection and contagion; management of patient, and surroundings; personal hygiene of nurse in attendance, etc.

Two. — Symptomatology in Disease: what and how to observe accurately; vital organs and special symptoms. The model sick-room; temperature, light, ventilation, care of bed, bedding, and clothing, furniture, utensils, disinfection, cleansing, dusting, etc.

One. — Contagious Fevers and Epidemics: prevention of contagion, disinfection, care of habitation, etc.

Three. — Care of Children in Health and Disease: diet and clothing of infants and children; various infantile diseases.

Two. — Physiology of Pregnancy and Labor: delivery, confinement nursing.

One. — On Gynæcological Nursing: preparation of patient for examination or operation; operations after treatment, douches, use of catheter, etc. (Demonstrations to sections of senior nurses in Ward S operating-room.)

One. — Special Nursing in Nervous Diseases, including the Insane.

Two. — Special Nursing in Skin Diseases and Syphilis in the Infant and Adult.

One. — { Special Nursing in Diseases of the Eye.
Anatomy and Physiology of the Eye, and General Care in Health and Disease.

One. — Special Nursing in Diseases of the Ear: its care in health and disease; nurses' duties at operations and continued treatment in disease.

One. — Special Nursing in Croup, Laryngitis, Tracheotomy, Intubation, etc.

One. — Urine: characteristics, properties, including taking notes on same, and brief analysis. Drill in laboratory by classes in sections.

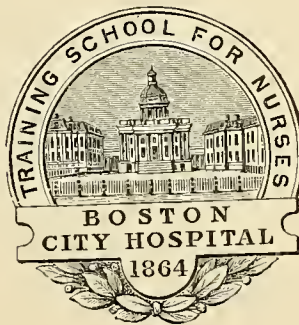
One. — *Massage*, its history, theory, and modes of application.

Two. — Visceral Anatomy: demonstrations by post mortems; care of the dead, etc.

LIST OF GRADUATES.

TRAINING SCHOOL FOR NURSES, THE BOSTON CITY HOSPITAL.

[*Married. †Died.]



1879.

Miss Rosa McCormick,
 " N. Elizabeth Fillebrown,
 † " Mary L. Kelso,

Miss Elizabeth A. Andrews,
 * " Myra E. McIlvin,
 * " Martha J. Blackwood. (6)

1880.

Miss Asenith Clement,
 Mrs. Margaret Little,
 Miss Annie Cochran,
 † " Louisa Morrill,
 Mrs. Lucy Rice,
 * Miss Eva Hallowell,
 " Mary E. Prescott,

Mrs. Maria Hatch,
 † Miss Olivia Hews,
 " Mary Monteith,
 † " Victoria O. Fowler,
 * " Minnie Gilman,
 " Anna C. Maxwell,
 Mrs. Sarah Cooke. (14)

1881.

† Miss Mary Mack,
 * " Jennie Shotwell,
 * " Flora Hadley,
 † " Mary Choate,
 " Georgeanna Russell,
 Mrs. Endenilla S. Neily,

Mrs. Mary Griswold,
 * Miss Lily Birkbeck,
 * " Josie Smith,
 * " Mary A. Ferrin,
 " Helen M. Hall,
 Mrs. Bertha J. Raemisch. (12)

1882.

† Miss Carrie L. Barrell,
Mrs. Kittie C. Soule,
* Miss Georgia L. Forbes,
“ Laura A. C. Hughes,

* Miss Annie Martell,
“ Mary Quinn,
“ Julia Macrae,
“ Annie E. Barker. (8)

1883.

* Miss E. Adelaide Nason,
“ Mina P. Hill,
* “ Christina M. Gregoire,
† Mrs. Jane E. Young,
Miss Myra C. Hight,
“ Susie H. Hamblet,
“ Rose A. Duffy,
“ Mary C. Morris,
“ Sarah W. Emerson,
“ Clara E. Bowen,
“ Kate M. Fitzgerald,
“ Margaret McKenzie,
“ Jennie B. McIntosh,

Miss Ida M. Welsh,
“ Annie Soper,
“ Susan Bradley,
* “ Maria Aanrud,
* “ Jane Howell,
“ Emma L. Stowe,
“ Elizabeth Stewart,
“ Clara C. Tubman,
“ Mary E. Gordon,
“ Lucinda McBride,
“ Eliza F. Speneer,
* “ Mary L. Drown. (25)

1884.

Miss Luey L. Drown,
* “ Annie J. Ellers,
“ Fanny A. Tucker,
“ Elizabeth Rinker,
“ M. Elizabeth Barr,
“ Elizabeth Banister,
“ Abbie A. Reed,
“ Margaret McKean,
“ Armina C. Manchester,
“ Harriet M. Seaver,

Miss Bessie S. Morrill,
* “ Ellen A. Dunton,
“ Margaret Macdonald,
“ Anna M. Battelle,
* “ Lillian I. Price,
“ Sarah G. Whitney,
“ Mary E. Seannell,
Mrs. Mary B. Runyan,
Miss Catherine Murray. (19)

1885.

Miss Fannie A. Prindle,
“ Adelle B. Braman,
“ Minnie Starr,
“ Clara D. Hoar,
“ H. Josephine Shepherd,
“ Sarah M. Cushing,
“ Clara M. Rowell,
* “ Glendine Malkson,
“ Lida S. Young,
“ Annie S. Miller,

Miss Jessie J. Glen,
“ Mary E. Woods,
“ Emily Neale,
“ Mary J. Rimmer,
“ Kate G. Early,
* “ Helen L. Godding,
“ Julia E. Reed,
“ Colina E. M. Somerville,
* “ Jessie Read. (19)

1886.

* Miss Alice E. Cole,	Miss Emma R. Trafton,
“ Emma J Gordon,	“ Susie B. Swanton.
“ Sarah E. Snow,	Mrs. Mary E. Bradbury,
* “ Mary E. Stinson,	Miss Cicely M. Whitaker,
“ Georgianna Shaw,	† “ Elizabeth Fearon,
“ Flora E. Welch,	“ Ella A. Starkweather,
“ M. Annabel Moore,	“ Lizzie A. Wilber,
“ Emma E. Cole,	“ Mary J. Dunway,
“ Lucretia F. Williams,	Mrs. Josephine S. Wood,
“ Mary C. Stewart,	“ Isabella R. Outerbridge,
“ Emma B. Morrison,	Miss Mary Fyfe,
* “ Mary A. Martin,	“ Anna M. Hawes,
* “ Rosina G. Brine,	“ Olivia Byrne,
“ Ruth A. Bassett,	“ Agnes C. Haley.
“ Mary A. White,	

(29)

1887.

Miss Luise Gibbpeck,	Miss Emily A. Rogers,
“ Mary Grugane,	“ Ruthett Adams,
“ Maria Wagner,	* “ Louise J. Knaut,
“ Libbie S. Ainsworth,	“ Caroline H. Keer,
“ Charlotte A. McCallum,	“ Oceania Nickerson,
“ Frances H. Petrikin,	“ Abbie J. Jenkins,
“ Mary A. Hahn,	“ Flora Macrae,
* “ Delia O'Brien,	“ Alzine M. Castlebury,
“ Lucia E. Weymouth,	“ Sarah C. Hamlyn,
“ Julia A. Purdy,	“ Elizabeth J. Fay,
“ Harriet M. Wallace,	* “ Jeanie White,
“ Alice E. Bailey,	“ Jennie Dudley,
“ Helen A. Quinn,	“ Frances L. Mackie,
“ Mary E. Kenney,	“ Olive A. Hawes,
“ Sarah M. Webber,	“ Evangeline McDonald.

(30)

1888.

Miss Emma J. Jones,	Miss Alice M. Hodgson,
* “ Flora E. Hodges,	“ Belle A. Stevens,
“ Stella Lyman,	“ Myra A. Swain,
“ Bertha Elliot,	“ Mary E. Collingwood,
“ Alicia Ring,	“ Almeda J. Goodspeed,
“ Maria B. Clark,	“ Ella M. Gordon,
“ Maria L. Eustis,	“ Lucia F. Vickery,
“ Emily O. Boswall,	“ Evelena Chapman,
“ Eleanor Cobb,	* “ Helen Coull,
“ Eva M. Homer,	“ Lilia M. Alexander,
Mrs. Alice H. Porter,	“ Mary O. Barnes.

(22)

1889.

Miss Mary M. Riddle,
 " Ella E. Owen,
 " Alice G. Symonds,
 * " Emmanette Veazie,
 " Mary A. Morris,
 " Maggie J. Thompson,
 " Annie Monroe,
 * " Mary E. R. Wilkinson,
 " Jennie R. Dix,
 " Rosalin A. Meggison,
 " Mary O. Ellms,
 " M. Affia Martin,
 " Abbie A. Bliss,
 " Anna R. French,

Miss Catherine M. Haggart,
 " Abbie F. Proctor,
 " Emma E. Penfold,
 " A. Etta Bodwell,
 " Rose Morgan,
 " Annie E. McCarthy,
 " Mabel H. Tibbetts,
 " Mary E. Jones,
 " Louisa L. Smith,
 " Eliza Jones,
 " Mary Scarlett,
 * " Sarah L. Richardson,
 " Jessie M. Symonds,
 " Rachel Gordon. (28)

1890.

Miss Mary T. Carroll,
 * " Jennie M. Harlow,
 " Harriet H. Page,
 " Elizabeth Rice,
 " Charlotte F. Grant,
 " Carrie B. Whallon,
 " Catherine A. McNally,
 Mrs. Ida M. Rice,
 Miss Anna Harms,
 " Catherine B. Graham,
 " Amalie H. Lakemann,
 * " Mabel Van Cortlandt,
 " Sarah M. Cox,
 " Grace H. Raine,
 Mrs. Annie L. Ray,

Miss Henrietta Rankin,
 " Margaret J. Moore,
 " Margaret A. Motschmann,
 " Grace G. Pillsbury,
 " Eliza F. Wadsworth,
 " Elizabeth Olmsted,
 " Annie C. Chamberlain,
 " Fannie P. Cooke,
 " Alice G. Dexter,
 " Florence E. Levensaler,
 " Bessie Sands,
 " Kate M. Walsh,
 " Minnie McLeod,
 " Clarissa A. M. G. Baldwin,
 " Cynthia A. Spencer. (30)

1891-2 (13 mos.).

Miss Lucetta J. Gross,
 " Ellen Magner,
 " Susan E. Stamer,
 " C. Isabelle Wright,
 " Addie E. Waterman,
 " Ethel Sharpley,
 " Sarah L. Taylor,
 " Jessie C. Pearce,
 " Ida A. Nutter,
 " Mary Brennan,
 " Janet Anderson,
 " Elizabeth A. Lary,
 " Anna R. Collins,
 " Sarah E. Hilt,
 " Delia Knight,
 " Mary E. Comey,
 " M. Georgena McNear,

Miss Elizabeth E. Spratt,
 " Etta A. Chamberlin,
 " Minnie S. Nickerson,
 " Henrietta B. Chisholm,
 " Annie L. Mullen,
 " Anna S. Langin,
 " Lydia A. Brewster,
 " Laura B. Bingham,
 " Lucy S. Byles,
 " Jessie MacDonald,
 " Maria A. Nicholl,
 " Nora McCormick,
 " Mary A. Foster,
 " Elizabeth J. McGeachey,
 " Minnie J. Stowe,
 " Emma T. Elliott,
 " Alice T. Myrick. (34)

1892-3.

Miss Martha S. Barr,
“ Elizabeth C. Fairbank,
“ Margaret E. Nelligan,
“ Sadie R. Harbourne,
“ Annie S. Clapp,
“ Julie M. Rogivue,
“ Annie B. Dick,
“ Grace M. Hart,
“ Mary Jones,
“ Anna B. Jordan,
“ Nettie M. Burnett,
“ Huldah J. Oliver,
“ Inez Maud Wright,

Miss Myra Fletcher,
“ Susie J. Hill,
“ Janet Rutherford,
“ Alberta E. Trueworthy,
“ Elizabeth Sloan,
“ Mary A. Neil,
“ Mabel I. Walsh,
“ Lillian M. Palmer,
“ Eva F. Lucas,
“ Mary Eva Moore,
“ Alfaretta Small,
“ Mary L. Cook.

(25

Total graduates 301.

DIETARY FOR PATIENTS.

MILK DIET. DAILY. — Milk, 3 pints; Bread (Wheat or Graham), toasted, if desired; Butter, Rice, Oatmeal, Corn Starch, or Farina.

HOUSE DIET.

Sunday. BREAKFAST.	Monday. BREAKFAST.	Tuesday. BREAKFAST.	Wednesday. BREAKFAST.	Thursday. BREAKFAST.	Friday. BREAKFAST.	Saturday. BREAKFAST.
Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Porridge of Oatmeal, Cornmeal, or Wheaten Grits, etc.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Meat Hash.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Porridge, or Mush, of Oatmeal, Cornmeal, or Wheaten Grits, etc.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Corned Beef Hash.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Porridge of Oatmeal, Cornmeal, or Wheaten Grits, etc.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Porridge, or Mush, of Oatmeal, Cornmeal, or Wheaten Grits, etc.	Coffee, or Tea, or Cocoa, with Milk and Sugar, Bread (Wheat, Graham, and Brown), Butter, Fish Hash.
DINNER.	DINNER.	DINNER.	DINNER.	DINNER.	DINNER.	DINNER.
Roast Beef, or Mutton, Potatoes, Bread.	Soup, or Stewed Meat, Vegetables, Bread, Pudding, of Bread, Rice, Oatmeal, Hominy, or Corn Starch.	Corned Beef, Boiled, Turnips, or Cabbage, Potatoes, Bread.	Roast Beef, or Mutton, Roast Boiled, Potatoes, Tomatoes, or other Vegetables, Bread.	Soup, or Stewed Meat, Vegetables, Bread, Pudding, of Bread, Rice, Oatmeal, Hominy, or Corn Starch.	Fish, Fresh or Salt, Potatoes, Beets, or other Vegetables, Bread.	Soup, or Stewed or Minced Meat, Potatoes, Bread, Pudding, of Bread, Rice, Oatmeal, Hominy, or Corn Starch.
SUPPER.	SUPPER.	SUPPER.	SUPPER.	SUPPER.	SUPPER.	SUPPER.
Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.	Coffee, or Tea, Shells, or Cocoa, with Milk and Sugar, Bread (Wheat or Graham), Butter.

EXTRAS. — In addition to the above, the following extras may be ordered by the Visiting Physicians and Surgeons: Milk, Beef Tea, Chicken Broth, Mutton Broth, Grmel, Oatmeal Mush, Corn Starch, Boiled Rice, Eggs, Beefsteak, Mutton-chop, and Chicken.

A small allowance of Milk and Beef Tea will be provided for each ward daily. The House Physician or Surgeon may order these articles by a signed special order, in each case, when needed, for patients who enter in the intervals between the regular visits of the Visiting Physician or Surgeon to whom the case is assigned.

All Wines and Liquors, Ale, Beer, etc., will be ordered by the Visiting Physicians and Surgeons only, excepting in emergencies, when special orders for the same may be given by the House Physician or Surgeon, to be afterwards approved by the Visiting Physician or Surgeon, as the case may be, or by the Resident Physician.

JULY 2, 1878.

By Order of the Trustees.

Unison ditto
change of the before
school

B.P.L. Bindery,
OCT 30 1893

